Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Inspection

Form 990 (2015)

Α	For th	e 2015 calendar year, or tax year beginning JUL 1, 2015 and	ending J	UN 30, 2010	<u> </u>				
В	Check if applicab	C Name of organization		D Employer identif	ication number				
	Addre	UNITED WAY OF NEW YORK CITY			C4 FC04				
L	Name chang			13-2	617681				
F	Initial return Final return	205 EV CA (3MD) CABEEA	Room/suite	E Telephone number 212-251-2431					
	termin			G Gross receipts \$ 72,077,947.					
	Amen	ded NEW YORK, NY 10017		H(a) Is this a group r	etum				
	Application	F Name and address of principal officer:OSCAR RAPOSO			s? Yes X No				
	pendi	SAME AS C ABOVE		H(b) Are all subordinates i	included? Yes No				
T	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) c	or 527	If "No," attach a	a list. (see instructions)				
J	Websi	te: WWW.UNITEDWAYNYC.ORG		H(c) Group exemption					
		organization: X Corporation Trust Association Other	L Year	of formation: 1968	M State of legal domicile: NY				
	art I	Summary		· · · · · · · · · · · · · · · · · · ·					
-	1	Briefly describe the organization's mission or most significant activities: UNITI	ËD WAY	OF NEW YOR	K CITY				
Activities & Governance	Ι.	UNIQUELY WORKS WITH BUSINESS, GOVERNMENT	AND (SEE SCHEDUL	EO)				
ם		Check this box if the organization discontinued its operations or dispos							
Vē				3	36				
Ĝ		Number of independent voting members of the governing body (Part VI, line 1a)			36				
oŏ		Total number of individuals employed in calendar year 2015 (Part V, line 2a)		·····	113				
ţį		• • • • • • • • • • • • • • • • • • • •			2974				
\$		Total number of volunteers (estimate if necessary)							
Ac		Total unrelated business revenue from Part VIII, column (C), line 12							
_	b	Net unrelated business taxable income from Form 990-T, line 34							
	_			Prior Year 56,497,449.	Current Year 61,875,439.				
93	1	Contributions and grants (Part VIII, line 1h)		485,483.	330,597.				
len Gu	9	Program service revenue (Part VIII, line 2g)		486,734.	433,978.				
Revenue	10	Investment income (Part Vill, column (A), lines 3, 4, and 7d)			67,649.				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		57,469,666.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		39,568,454.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		8,493,924.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		160,000.	226,750.				
Š	b	Total fundraising expenses (Part IX, column (D), line 25) 4,035,75	51.						
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,080,163.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		55,302,541.					
	19	Revenue less expenses. Subtract line 18 from line 12		2,167,125.	-1,199,049.				
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year				
age age	20	Total assets (Part X, line 16)		36,674,022 .	36,693,033.				
ABS	21	Total liabilities (Part X, line 26)		23,924,127.	27,602,315.				
萼	22	Net assets or fund balances. Subtract line 21 from line 20		12,749,895.	9,090,718.				
P	art II	Signature Block							
		lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of m	y knowledge and belief, it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh							
	,	Mayor Kapn		5/12	117				
Sig	n	Signature of officer		Date					
Her		OSCAR RAPOSO, EVP & CFOO							
пеі	-	Type or print name and title							
_		Print/Type preparer's name Premarer's signature	D	ate / Check	PTIN				
Paid	d	ROBERT LYONS	カ *	712/17 if self-employ	P00227472				
	parer	Firm's name MARKS PANETH LLP		Firm's EIN	11-3518842				
	Only		-	THIII 3 CITY					
A96	Only	Firm's address 685 THIRD AVENUE NEW YORK, NY 10017		Phone no 21	2-503-8800				
N/-	. 44 - 17	NEW TORK, NT TOUT/		Filolie IIU. Z I	X Yes No				
BASI	U TOO IL	ON THEOLOGY LONG POTHER WITH THE DESIGNATE SHOWER SHOWER SHOWER INSTRUCTIONS!			163 190				

Return of Organization Exempt From Income Tax

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

Open to Public

Department of the Treasury Internal Revenue Service

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Inspection

and ending JUN 30, 2016 A For the 2015 calendar year, or tax year beginning JUL 1, 2015 D Employer identification number В Check if applicable: C Name of organization Address change UNITED WAY OF NEW YORK CITY Name change 13-2617681 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 212-251-2431 Final 205 EAST 42ND STREET termin-termin-ated 72,077,947. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended return 10017 NEW YORK, NY H(a) is this a group return Applica-tion pending F Name and address of principal officer: OSCAR RAPOSO for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or 527 If "No," attach a list. (see instructions)) (insert no.) L J Website: ➤ WWW.UNITEDWAYNYC.ORG H(c) Group exemption number ▶ Other > L Year of formation: 1968 M State of legal domicile: NY K Form of organization: X Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: UNITED WAY OF NEW YORK CITY Activities & Governance UNIQUELY WORKS WITH BUSINESS, GOVERNMENT AND (SEE SCHEDULE O) Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 36 Number of voting members of the governing body (Part VI, line 1a) 36 4 Number of independent voting members of the governing body (Part VI, line 1b) 113 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 2974Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year** Current Year 56,497,449. 61,875,439. Contributions and grants (Part VIII, line 1h) Revenue 330,597. 485,483. Program service revenue (Part VIII, ilne 2g) 486,734. 433,978. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 67,649. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 57,469,666. 62,707,663. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 46,230,581. 39,568,454 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 8,493,924 10,502,569. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 160,000. 226,750. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 4,035,751. 6,946,812. 7,080,163. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 63,906,712. 55,302,541. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,199,049. 2,167,125 Revenue less expenses. Subtract line 18 from line 12 Assets or Balances Beginning of Current Year **End of Year** 36,674,022 36,693,033. 20 Total assets (Part X, line 16) 27,602,315. 23,924,127. 21 Total liabilities (Part X, line 26) Plet A 12,749,895. 9,090,718. Net assets or fund balances, Subtract line 21 from line 20 22 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign OSCAR RAPOSO, EVP & CFOO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signatu P00227472 Paid ROBERT LYONS self-employed Firm's name MARKS PANETH LLP 11-3518842 Firm's EIN 👞 Preparer Firm's address 585 THIRD AVENUE Use Only Phone no. 212-503-8800 NEW YORK, NY 10017 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2015)

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X ff "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or 5 X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, ·X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 X or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines X 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

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Part IV Checklist of Required Schedules (continued) Yes No X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No", go to line 25a 24a 24b 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 to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X 26 complete Schedule L, Part II 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? 31 X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V, line 1 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X 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?

Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2015) UNITED WAY OF NEW YORK CITY

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
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			1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1¢		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 113			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	_	77	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Λ	
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7-		x
	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	·	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter:	l		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	44-	-	X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	<u></u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	gan	(2015)

Form 990 (2015) UNITED WAY OF NEW YORK CITY 13-2617681 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI		,			X.
Sec	tion A. Governing Body and Management					
	· · · · · · · · · · · · · · · · · · ·				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	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 independent	1ь	36			1.7
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		v other			
_	officer, director, trustee, or key employee?			2		x
3	Did the organization delegate control over management duties customarily performed by or under the					
•	of officers, directors, or trustees, or key employees to a management company or other person?			3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
5				6		X
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or a					
7a				7a		х
	more members of the governing body?			7 d		- 22
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			- 1.		X
	persons other than the governing body?			7b		Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			_	v	
а	The governing body?			8a	X	-
b	Each committee with authority to act on behalf of the governing body?		ı	8b_	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real		 			
	organization's malling address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue C	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	if "Yes," did the organization have written policies and procedures governing the activities of such cl	napters,	affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before	filing the form?	11a	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflic	ts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," desc	ribe			
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-				
а	The organization's CEO, Executive Director, or top management official			15a	X	
	Other officers or key employees of the organization			15b	Х	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent with	ıa			
	taxable entity during the year?		I	16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		,			
	exempt status with respect to such arrangements?			16b		
Sect	tion C. Disclosure			100		
	List the states with which a copy of this Form 990 is required to be filed NY, NJ, CT, AL, A	K AR	.CA.CO.DC	.FI.	.GA	.HT
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T					, <u>-</u>
18		COCTION	ou nonana uniy) a	vandD		
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain	in Schoo	iule (1)			
40	· ·		•	finan	oial	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	mict of I	iterest policy, and	in idifl	oldi	
	statements available to the public during the tax year.	alan ee d				
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and I	ecords:			_
	GINA GOODENOW, CONTROLLER (212) 251-4042 205 EAST 42ND STREET, NEW YORK, NY 10017					
	AND DEAT ARM DIVERT' HEM TANK' MT TAAT!					

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not a	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per	box	c, unle	ss pe	reon	ls bot	th an	compensation	compensation	amount of
	week (list any	\vdash	T	<u> </u>		П	Ė	from the	from related organizations	other compensation
	hours for	direct				-		organization	(W-2/1099-MISC)	from the
	related	10 68	stee			agg.		(W-2/1099-MISC)	(,	organization
	organizations	trus	naltri		03/89	E E				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(4)	line)	를	lns	₩	<u>®</u>	£	چ			
(1) ROBERT KUEPPERS	1.00	X		x				0.	0.	_
DIR. BOARD CHAIR (FORMER)	1.00	<u> </u>		Δ.	-	-		0.	0.	0.
(2) JOSEPH A. CABRERA	1.00	x		x				0.	0.	0
DIRECTOR, VICE CHAIR	1.00	_		Δ	⊢		\vdash	0.	0.	0.
(3) CHERYLE A. WILLS DIRECTOR SECRETARY	1.00	X		x				0.	0.	0.
(4) DONALD F. DONAHUE	1.00			Δ			Н	0.	0.	0.
DIRECTOR, CO-CHAIR	1.00	x		Х				0.	0.	0.
(5) ANDREW ALFANO	1.00	-	\vdash	21			H	0.		
DIRECTOR	1.00	x	l					0.	0.	0.
(6) BERNICE CLARK	1.00			\vdash			Н			
DIRECTOR		x						0.	0.	0.
(7) SUSAN L. BURDEN	1.00	-			Н		Н			
DIRECTOR		x						0.	0.	0.
(8) J. EMILIO CARRILLO, MD, MPH	1.00		П							
DIRECTOR		X						0.	0.	0.
(9) MARIANNE D. COOPER	1.00									
DIRECTOR		X						0.	0.	0.
(10) STEPHEN J. DANNHAUSER	1.00									
DIRECTOR		X						0.	0.	0 -
(11) KIMBERLY B. DAVIS	1.00									
DIRECTOR (FORMER)		X						0.	0.	0.
(12) BRENDAN DOUGHER	1.00								-	
DIRECTOR		X						0.	0.	0.
(13) ROBERT A. DUPUY	1.00									_
DIRECTOR		X	\Box		_		_	0.	0.	0.
(14) NEIL MASTERSON	1.00									
DIRECTOR	4 00	X			_			0.	0.	0.
(15) WILLIAM K. FLEMMING	1.00		- 1		ľ		ı			•
DIRECTOR	1 00	X		_	_	_		0.	0.	0.
(16) ROBERT FRIEDMAN	1.00	,,		<u>,</u>				_	_	0
DIRECTOR AND TREASURER	1 00	X	\dashv	X	-	-	-	0.	0.	0.
(17) FELIX V. MATOS RODRIQUEZ	1.00	x					-	0.	0.	0
DIRECTOR		Δ						. 0.1	U . J	0.

Part VII Section A. Officers, Directors, Tru	ıstees, Key Em	plo	yees	, an	d H	ighe	st C	ompensated Employe	es (continued)			
(A)	(B)	П		(C)			(D)	(E)		(F)	
Name and title	Average	(de	not c	Pos	itior) o than	ODE	Reportable	Reportable	E	stimat	ed
	hours per	box	c, unle	ss pe	erson	is bot	th an	compensation	compensation	a	mount	
	Week		Cer ai	luac	I	JI/H UR	100)	. from	from related		other	
	(list any hours for	or director					l	the	organizations (W-2/1099-MISC)		npensa from th	
	related	e or d	g			sated		organization (W-2/1099-MISC)	(VV-2/1089-WIGC)		ganizat	
	organizations	8	l E		2	m per		(11-27 1039-1/1100)		,	nd relat	
	below	Individual trustee	Institutional trustee	_	Кеу етріоуве	sst co	<u>.</u>				anizati	
	line)	lagi.	整	Officer	Key	Highest compensated employee	Готты					
(18) ISIDORE MAYROCK	1.00											
DIRECTOR		X						0.	0.			0.
(19) ANISH MELWANI	1.00											
DIRECTOR		X		ĺ		l		0.	0.			0.
(20) TED MOUDIS	1.00	Г				П						
DIRECTOR		X						0.	0.			0.
(21) ROBERT MULLEN	1.00											
DIRECTOR		X						0.	0.			0.
(22) DAVID OWEN	1.00							_				
DIRECTOR		X						0.	0.			0.
(23) JOSHUA B. MASON	1.00											
DIRECTOR		X	Ш					0.	0.			0.
(24) DENISE PICKETT	1.00											
DIRECTOR AND VICE CHAIR		X	Ш	X		$oxed{oxed}$	Ш	0.	0.			0.
(25) JENNIFER RAAB	1.00	ļ	H									
DIRECTOR		X	Ш		lacksquare	Ш	Ш	0.	0.			0.
(26) BRAD ROTHBAUM	1.00							ا ا				
DIRECTOR		X						0.	0.			0.
1b Sub-total								0.	0.	1.0	3 F	0.
c Total from continuation sheets to Part \								1,799,256.	0.		3,5	
d Total (add lines 1b and 1c)								1,799,256.		ТО	3,5	09.
2 Total number of individuals (including but	not limited to th	ose	liste	d at	oove	e) wh	o re	sceived more than \$100	,000 of reportable			18
compensation from the organization											Yes	No
2 Did the averagination list any forward officers	dînadan andı.		. Iam		!_						163	140
3 Did the organization list any former officer										3	х	
line 1a? If "Yes," complete Schedule J for										3		
4 For any individual listed on line 1a, is the s and related organizations greater than \$15										4	$ \mathbf{x} $	
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes," con					-			•		5		x

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SAFIR & ASSOCIATES LLC		
1394 BARROWS AVENUE, OAKLAND , CA 94610	CAPACITY BUILDING	261,500.
THE TASC GROUP, LLC, 153 WEST 27TH STREET,	MARKETING &	
STE 405, NEW YORK, NY 10001	COMMUNICATION	170,565.
WENDY FLEISCHER	CHANGE CAPITAL FUND	
674 CARROLL STREET #4, BROOKLYN, NY 11215	COORDINATOR	160,870.
SUZETTE HUNTE	·	
327 MACDONOUGH ST, BROOKLYN, NY 11223	STRATEGIC LEADERSHIP	156,000.
ATAPE GROUP LLC	INSTRUCTIONAL	
555 KAPPOCK ST, BRONX, NY 10463	LEADERSHIP	147,500.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization > 9		

	WAY OF N								13-201	7001
Part VII Section A. Officers, Directors,	Trustees, Key E	mpl	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	2)			(D)	(E)	(F)
Name and title	Average	Position						Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ily)	compensation	compensation	amount of
	per	È	1			,	1	from	from related	other
	week	l				386		the	organizations	compensation
	(list any	ą				줥		organization	(W-2/1099-MISC)	from the
	hours for	or director	_			B pag		(W-2/1099-MISC)		organization
	related	stee (髻		_	BUSS				and related
	organizations	ndividual trustee	nstitutional trustee		Көу өтріоуве	Highest compensated employee				organizations
	below	N N	薑	Officer	emp.	hest	Ботпег			
	line)	를	125	₹	2	훒	조			
(27) MICHAEL SCHMIDTBERGER	1.00									
DIRECTOR AND CO-CHAIR		X		X				0.	0.	0.
(28) JEFFREY SHERMAN	1.00									
DIRECTOR		X						0.	0.	0.
(29) AMANI TOOMER	1.00		Н							
DIRECTOR		x						0.	0.	0.
(30) DAVID TURNER	1.00		\vdash		\vdash	\vdash	H			
* *	1.00	x			ı			0.	0.	0.
DIRECTOR	1 00	Δ	Н		\dashv		H	0.	0.	
(31) KARYN TWARONITE	1.00									0
DIRECTOR		X	Щ		_		_	0.	0.	0.
(32) LISA CARNOY	1.00							_		
DIRECTOR		X						0.	0.	0.
(33) CHARLES P WANG	1.00									
DIRECTOR		X						0.	0.	0.
(34) RUDOLPH WYNTER	1.00				\neg					
DIRECTOR		x						0.	0.	0.
(35) KYUNG B, YOON	1.00			\neg	\dashv					
DIRECTOR	2100	x						0.	0.	0.
(36) NANCY ZIMPHER	1.00		\vdash	\dashv	-	\vdash				
DIRECTOR	1.00	X						0.	0.	0.
	1.00	Δ	\vdash	-	\dashv	-			- 0.	0.
(37) ROSSIE TURMAN III	1.00							ا م		0
DIRECTOR	- 1 00	X		_	4			0.	0.	0.
(38) DIPTI GULATI	1.00									
DIRECTOR		X		,				0.	0.	0.
(39) SHEENA WRIGHT	50.00		ì							
PRESIDENT & CEO				X				358,334.	0.	24,413.
(40) JOHN A. MCKEGNEY	50.00									
EXEC. VP & CFO (FORMER)				x				95,792.	0.	726.
(41) SUNITA SUBRAMANIAN	45.00				一	\neg				
GENERAL COUNSEL AND ASST.				x				196,272.	0.	8,581.
(42) LESLEIGH IRISH-UNDERWOOD	45.00				\dashv	\dashv				
• •	#3.00				x			205,370.	0.	8,948.
SNR VP OF MARKETING & COMM	45.00		\dashv	\rightarrow	4	\dashv	\dashv	203,370.	0.	0,740.
(43) NICOLE GALLANT	45.00		ı		.			105 425	۸	7 724
SNR VP OF CI	75 00	_	-	-	X	_	_	195,435.	0.	7,724.
(44) ELENA PAK	45.00			- [_		445 544		10 606
SR VP OF RESOURCE DEV. (FORMER)						X		145,644.	0.	19,606.
(45) JACQUELINE JENKINS	45.00									
VP OF STRATEGY MANAGEMENT			_	_	_	X		149,399.	0.	14,696.
(46) MIRIAM BENITEZ	45.00		\neg	\sqcap	\neg	\neg	\Box			
VP OF HUMAN CAPITAL						X		146,407.	0.	12,967.
Total to Part VII, Section A, line 1c										
Total to Fait Vit, Occupita, line To										

Form 990 UNITED V	VAI OF N								13-201	
Part VII Section A. Officers, Directors, T		mple	oyee			ligh	est			
(A) Name and title	(B) Average hours	(c	heck	Pos	C) ition that		oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	itee or director	Institutional trustee	Officer	Кеу втрюува	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) MINDEE H. BARHAM (FORMER)	45.00					х		165 145	0.	32,205
SEN, V.P. & CHIEF DEV, OFFICER (48) PATRICK MA	45.00	-	\vdash	H		Δ	H	165,145.	0.	32,203
(48) PATRICK MA VP OF OPERATIONS	45.00	ł				X		141,458.	0.	33,703
VF OF OFBRAITOND	-				Н	23	\vdash	111/1501	0.	357.55
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Statement of Revenue

Part VIII

Page 9

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns 27,249,436, b Membership dues 1b 2,585,205, c Fundraising events 10 d Related organizations 7,549. 1d 26,115,256. e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 5,917,993 204,800. Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 61,875,439 Business Code 330,597 Program Service Revenue CAMPAIGN FEES 900099 330,597 2 a f All other program service revenue 330,597 Total. Add lines 2a-2f Investment income (including dividends, interest, and 267,684 267,684. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (if) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) ... 7 a Gross amount from sales of (i) Securities (li) Other 9,082,611, assets other than inventory b Less: cost or other basis 8,916,317. and sales expenses c Gain or (loss) 166,294. d Net gain or (loss) 166,294. 166,294 8 a Gross income from fundraising events (not Revenue including \$ 2,585,205. of contributions reported on line 1c). See 453,967 Part IV, line 18 _____a Other 453,967 b Less: direct expenses 0 Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 _____a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a OTHER REVENUE 67,649. 900099 67,649 d All other revenue e Total. Add lines 11a-11d 67,649 501,627. 62,707,663. 330,597. Total revenue. See instructions. Form 990 (2015)

Form 990 (2015) UNITED WAY OF NEW YORK CITY
Part IX Statement of Functional Expenses

	otatement of Functional Expens				
Sec	tion 501(c)(3) and 501(c)(4) organizations must con			omplete column (A).	
	Check if Schedule O contains a respo			(6)	///
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	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		l		
	individuals. See Part IV, line 22	264,821.	264,821.	1.	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16		<u> </u>		
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)			ļ	
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.	33,104. 235,399.
10	Payroll taxes	634,287.		278,845.	131,555.
11	Fees for services (non-employees):				
а.	Management				
h	Legal	96,438.		96,438.	
		50,2500		70,1000	
d	Accounting				
- G	Professional fundraising services. See Part IV, line 17	226,750.			226,750.
f	Investment management fees	71,899.		71,899.	22077301
	Other, (If line 11g amount exceeds 10% of line 25,	72,000.		71,0550	
9	column (A) amount, list line 11g expenses on Sch O.)	1,676,915.	425,910.	1,093,411.	157,594.
40	the state of the s	74,356.	19,982.	17,354.	37,020.
12	Advertising and promotion	397,141.	98,743.	115,053.	183,345.
13	Office expenses	231,1±1.	20,743.	113,033.	103,343.
14	Information technology				
15	Royalties	1,674,091.	650,214.	633,506.	390,371.
16	Occupancy	104,316.	52,179.	32,133.	20,004.
17	Travel	104,310.	32,113.	34,133.	20,004.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	267,018.	71,460.	151,207.	44,351.
19	Conferences, conventions, and meetings	633,130.	245,906.	239,588	147,636.
20	Interest				T#1,000*
21	Payments to affiliates	387,306.	122,899.	264,407.	112 102
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.)				
a	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.
0	All other expenses	22,200	,,		-,
25	Total functional expenses. Add lines 1 through 24e	63,906,712.	52,014,201.	7,856,760.	4,035,751.
<u>25</u> 26	Joint costs. Complete this line only if the organization	1010001177		.,,	_,,,,,,,,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here fit following SOP 98-2 (ASC 958-720)				
	TOROWING SUP 98-2 (ASC 958-720)				Form 990 (0045)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 954,091. 963,602. Cash - non-interest-bearing 1 424,722. 3,921,884. 2 Savings and temporary cash investments 13,491,294. 10,321,522. Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr), Complete Part II of Sch L 6 7 Notes and loans receivable, net Inventories for sale or use 8 939,127. 981,900. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 10,622.587. basis. Complete Part VI of Schedule D 10a 9,602,303. 10,291,307. 9,334,771. 9,458,295. 1,287,816. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 459,908. 1,265,261. 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 501,759. 455,309. Other assets. See Part IV, line 11 15 15 36,693,033. 36,674,022. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 2,210,185. 3,262,529. 17 17 Accounts payable and accrued expenses 5,729,538. 7,695,730. 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 10,522,642. 10,587,750. Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 5,461,762. 6,056,306. Schedule D 25 23,924,127. 27,602,315. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 5,545,457. 2,080,265. Unrestricted net assets 3,878,434. 4,683,510. Temporarily restricted net assets 28 28 2,326,943. 3,326,004. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 12,749,895. 9,090,718. Total net assets or fund balances 33 33 36,674,022. 36,693,033. 34 Total liabilities and net assets/fund balances

Forn	1990 (2015) UNITED WAY OF NEW YORK CITY	13-	2617	<u> </u>	P <u>a</u>	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	62	2,70	7,6	63.
2	Total expenses (must equal Part IX, column (A), line 25)	2	63	3,90	6,7	12.
3	Revenue less expenses. Subtract line 2 from line 1	3		,19		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	2,74		
5	Net unrealized gains (losses) on investments	5		-26	9,6	88.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8	 ,			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		,19	0,4	40.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	9	,09	0,7	<u> 18.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		·····			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
þ	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ə audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir		lit			
	Act and OMB Circular A-133?			3 <u>a</u>	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		iit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	
				Form	990	(2015)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization Employer Identification number UNITED WAY OF NEW YORK CITY 13-2617681 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is; (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 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 II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (Iii) Type of organization (iv) Is the organization (vi) Amount of (iii) EIN (v) Amount of monetary listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) Instructions) instructions) Yes No

Schedule A (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK CITY 13-26176

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	63681587.	67043537.	57980327.	<u>56280856.</u>	61875439.	<u>306861746</u>
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to		<u> </u>]		
	or expended on its behalf					_	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge]				<u> </u>
4	Total. Add lines 1 through 3	63681587.	67043537.	57980327.	56280856.	61875439.	306861746
	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)						
8	Public support, Subtract line 5 from line 4.						306861746
	etion B. Total Support						
		(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	(a) 2011 63681587.	67043537	(c) 2013 57980327.	56280856.	61875439.	306861746
	Gross income from interest.						
0	dividends, payments received on	,					
	securities loans, rents, royalties	Í					
		294 236	185,765.	192,129.	271,074.	267,684.	1210888.
•	and income from similar sources	252,250.	.103,7031	152,125.	2/1/0/11	20770021	1110000
9	Net income from unrelated business]			,		
	activities, whether or not the						
	business is regularly carried on				_:		
10	Other income. Do not include gain					· l	
	or loss from the sale of capital	E4 077	34,021.	33,548.		67,649.	80,241.
	assets (Explain in Part VI.)	-54,977.	34,041.	33,340.			308152875
	Total support. Add lines 7 through 10						300132073
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
3	organization, check this box and stor		roentago				
	tion C. Computation of Publ						99.58 %
	Public support percentage for 2015 (14	0.0
	Public support percentage from 2014					15	99.62 %
16a	33 1/3% support test - 2015. If the o	organization did no	t check the box o	n line 13, and line 1	14 is 33 1/3% or n	iore, check this bo	ox and
	stop here. The organization qualifies						
þ	33 1/3% support test - 2014. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2015. If the orga	anization did not d	heck a box on line	13, 16a, or 16b, a	ınd line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances tes	t - 2014. If the org	anization did not d	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	_					
	organization meets the "facts-and-circ						
	Private foundation. If the organizatio						
							or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK CITY Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						1
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		e.				
3	Gross receipts from activities that						
•	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	1	1				
-	The value of services or facilities						
9		1					
	furnished by a governmental unit to						
_	the organization without charge		1				
	Total. Add lines 1 through 5		<u> </u>				
78	Amounts included on lines 1, 2, and	1				4	
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8							
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6		` '				1.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
	check this box and stop here	_			-		▶ □
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2015 (I			olumn (fi)		15	%
16	Public support percentage from 2014					16	%
	tion D. Computation of Inves						
				o 12 - column (f)		17	%
	Investment income percentage for 20	•				18	
18	Investment income percentage from 2						
198	33 1/3% support tests - 2015. If the	-					
	more than 33 1/3%, check this box at		-				
b	33 1/3% support tests - 2014. If the	-					
	line 18 is not more than 33 1/3%, che			-			
20	Private foundation, If the organization	n did not check a l	box on line 14, 19a	ı, or 19b, check th	is box and see ins	tructions	<u></u>

Part IV | Supporting Organizations

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

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)			
Sec	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		'	1
	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			1
	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	_	<u> </u>
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a	ļ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		_
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	 	<u> </u>
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 by or in connection with its supported organizations.	_4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	4-		
_	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
		5a		
	was accomplished (such as by amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already	- 54	Н	
b	designated in the organization's organizing document?	5b		
	The state of the s	5c	Н	
6 6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		Н	
0	anyone other than (I) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		1 1	
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a	\sqcup	
h-	Did the experiention have any excess business holdings in the tay year? (I se Schedule C. Form 4720, to		ı I	

3a

trustees of each of the supported organizations? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sch	edule A (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK	CITY		13-2617681 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			ructions. All
	other Type III non-functionally integrated supporting organizations must co	omplete :	Sections A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2	·	
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			}
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	<u></u>	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount]		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly-integra	ated Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Pa	rt V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	janizations (continued)	
Sec	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ns		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	the organization is responsiv	/e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			1
10	Line 8 amount divided by Line 9 amount			
	, ————————————————————————————————————	(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
Sect	ion E - Distribution Allocations (see instructions)		Pre-2015	Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
_	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a	Entertain designation in any, to 2010.			
b				
c				
	From 2013			
	From 2014			
	Total of lines 3a through e			-
	Applied to underdistributions of prior years			<u> </u>
	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
•	line 7: \$			
2	Applied to underdistributions of prior years			
	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:			
	DIOGRAPHICA INTO A .			
<u>a</u> b				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015		<u> </u>	
0	LAUGGG HUIII ZUTU			

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-EZ	2015 UNI	TED WAY	OF	VEW	YORK	CITY		13-2617681	Page 8
Part VI	Supplemental	Informatio	n. Provide th	e evnlana	tione re	adulized by	Part II line 10:	Part II, line 17a or Section B, lines 1 Irt V, line 1; Part V, art for any addition	17b; Part III, line 12; and 2; Part IV, Sectior Section B, line 1e; Par nal Information.	-
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2015

UNITED WAY OF NEW YORK CITY 13-2617681 Organization type (check one): Filers of: Section: 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______ > \$_

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

UNITED WAY OF NEW YORK CITY

13-2617681

		-	
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ll space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW YORK CITY DEPARTMENT OF EDUCATION 52 CHAMBERS STREET NEW YORK, NY 10007	\$ 16,370,683.	Person Payrolt Noncash (Complete Part it for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NEW YORK STATE DEPARTMENT OF HEALTH HUNGER PREV. & NUTRITION 150 BROADWAY, 6TH FL W ALBANY, NY 12204	\$ <u>7,848,950</u>	Person X Payroll Noncash (Complete Part If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
23452 10-26	-15	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2015)

Employer identification number

UNITED WAY OF NEW YORK CITY

13-2617681

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part !	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
:=/.		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
23453 10-26-	.15	\$Schedule B (Form S	990, 990-EZ, or 990-PF) (2015)				

Employer identification number

UNITEI	WAY OF NEW YORK CITY				13-2617681				
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete	tributions to organizations columns (a) through (e) ai	described in sect nd the following lin	DON 501(C)(/), (8), OF IB entry, For organization	(10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religiou	us, charitable, etc., contributions	of \$1,000 or less for	the year. (Enter this info. once.	▶ \$				
	Use duplicate copies of Part III if addition	nal space is needed.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Desc	ription of how gift is held				
		`							
_				<u> </u>					
		(e) Trans	fer of gift						
			_						
-	Transferee's name, address, a	nd ZIP + 4	F	Relationship of trar	sferor to transferee				
(a) No.	·		<u> </u>	1					
(a) No. from Part I	(b) Purpose of gift	(b) Purpose of gift (c) Use of gift		(d) Desci	iption of how gift is held				
1 01 1 1									
		_			· ·				
	(e) Transfer of gift								
İ									
L	Transferee's name, address, a	nd ZIP + 4	F	Relationship of transferor to transferee					
(=\ M=				T					
(a) No. from	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is he					
Part I									
					 				
	 		<u>.</u>						
-		(e) Trans	fer of aift	<u> </u>					
Í	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	F	lelationship of tran	sferor to transferee				
			<u> </u>						
(a) No.	(b) Purpose of gift	(c) Use of	nift	(d) Descr	iption of how gift is held				
Part I	(8) 1 41 5000 01 3111	(0) 000 01		(4) 2000.					
-		/a\ T	for of nift						
		(e) irans	fer of gift						
	Transferee's name, address, ar	nd 7ID ± 4		elationship of trop	sferor to transferee				
	manareree a natile, audress, ar	IN SIF T T	<u>_</u>	iciauviisiiib ni ngii	OIVI VI LA MINING CO				
1.					•				

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

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.

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

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

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

	Section 501(c)(4), (5), or (6) organize	ations: Complete Part III.			
	ne of organization			Empl	oyer identification number
	UNITED	WAY OF NEW YORK O	CITY		13-2617681
Pá	art I-A Complete if the or	ganization is exempt unde	er section 501(c)	or is a section 527 o	rganization.
3	Provide a description of the organi Political expenditures Volunteer hours			▶ \$	
	art I-B Complete if the or				
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955	\$	
	Enter the amount of any excise tax				
	If the organization incurred a section		,		
	Was a correction made?		********		L Yes L No
LD-	o if "Yes," describe in Part IV. Int I-C Complete if the or		n acction 504(a)	event eastion E01/	a)(9)
		<u> </u>			
	Enter the amount directly expende				
2	Enter the amount of the filing organ exempt function activities		-		
2	Total exempt function expenditure				
0	line 17b				
4	Did the filing organization file Form	1120-POL for this year?	***************************************	······································	Yes No
5					
	made payments. For each organiza				
	contributions received that were pr	omptly and directly delivered to a	separate political orga	nization, such as a separa	te segregated fund or a
	political action committee (PAC). If	additional space is needed, provid	le information in Part I	V	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule C (Form 990 or 990 EZ) 2015 Part II-A Complete if the organization 501(h)).	UNITED ganization	WAY n is exe	OF NEW YORK mpt under section	CITY n 501(c)(3) and fi	13-2 led Form 5768 (e	617681 Page 2 lection under					
A Check Lift 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).											
Lim	its on Lobby	ing Expe	nd "limited control" pro nditures unts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals					
1a Total lobbying expenditures to infl	luence public	oninion ((grace roote Johnving)		0.						
b Total lobbying expenditures to infl					88,044.						
c Total lobbying expenditures (add	_				88,044.						
d Other exempt purpose expenditur					63,818,668.						
e Total exempt purpose expenditure	***************************************				63,906,712.						
f Lobbying nontaxable amount. Ent					1,000,000.						
If the amount on line 1e, column (a)			bying nontaxable am								
Not over \$500,000			the amount on line 1e								
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.							
Over \$1,000,000 but not over \$1,5		\$175,00	00 plus 10% of the exc	ess over \$1,000,000.							
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.							
Over \$17,000,000		\$1,000,	000.								
g Grassroots nontaxable amount (er	nter 25% of	line 1f)			250,000.						
h Subtract line 1g from line 1a. If zer	ro or less, en	ter -0			0.						
i Subtract line 1f from line 1c. If zero					0.						
j If there is an amount other than ze	ero on either	line 1h or	line 1i, did the organiz	ation file Form 4720	-						
reporting section 4911 tax for this	year?			***************************************	L	Yes No					
(Some organizations t	hat made a See t	section 5 the separa	ate instructions for li	have to complete all nes 2a through 2f.)	of the five columns b	elow.					
	Lobby	ing Exper	nditures During 4-Yea	r Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 20	112	(b) 2013	(c) 2014	(d) 2015	(e) Total					
2a Lobbying nontaxable amount	1,000	,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.					
b Lobbying ceiling amount (150% of line 2a, column(e))						6,000,000.					
c Total lobbying expenditures	87	,716.	265.	104,077.	88,044.	280,102.					
d Grassroots nontaxable amount	250	,000.	250,000.	250,000.	250,000.	1,000,000.					
e Grassroots ceiling amount (150% of line 2d, column (e))						1,500,000.					
f Grassroots lobbying expenditures	87	,164.		60,468.		147,632.					

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK CITY 13-261768 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of th	r each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description)	(b)	
	e lobbying activity.	Yes	No	Amo	ount
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:	1			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
	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?				
ī	Other activities?				
i	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)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	ľ			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or se	ction	
	501(c)(6).		••		
				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?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
1	answered "Yes."			t III-A, lin	
	Dues assessments and similar amounts from members				
2	Dues, assessments and similar amounts from members Section 162(a) pondeductible lobbying and political expenditures (do not include amounts of political			,	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	al	1		
2 a	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	al	2a		
a b	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	al	1 2a 2b		
a b c	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	al	2a 2b 2c		
a b c	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	al	2a 2b 2c		
a b c	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	al ess	2a 2b 2c		
a b c	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year?	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ess political	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		
a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess olitical	2a 2b 2c 3		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number 13-2617681

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	5	2
2	Aggregate value of contributions to (during year)	0.	1,280,000.
3	Aggregate value of grants from (during year)	79,089.	0.
4	Aggregate value at end of year	144,293.	1,710,010.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose co	nferring
	impermissible private benefit?		X Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a historic	cally 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 held a qualif	ied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic stru	ucture Included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	•
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	rganization during the tax
	year -		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conser	vation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	n easements during the year
_	> \$		(AVP)VO
8	Does each conservation easement reported on line 2(d) abov		
_	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation.		
9		•	
	include, if applicable, the text of the footnote to the organizat conservation easements.	ion s inancial statements that describes the	organization's accounting to
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" on Form	•	
1a	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art.
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ		,
h	If the organization elected, as permitted under SFAS 116 (AS		nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial da	ain, provide
_	the following amounts required to be reported under SFAS 11		•
а	Revenue included on Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990 Part X		S

Sche		WAY OF NEW							<u>17681</u>	
Pa	rt III Organizations Maintaining (Collections of A	rt, His	torical Tr	easures,	or Other	Simila	ar Asse	ts(continu	ed)
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	at are a sig	nificant	use of its	collection	items
	(check all that apply):			-	_					
а	Public exhibition	d		Loan or exc	hange progra	ams .				
b	Scholarly research	E e		Other						
C	Preservation for future generations	~								
4	Provide a description of the organization's c	ollections and explai	n how t	hev further t	he organizati	ion's exem	ot purpo	se in Par	t XIII.	
5	During the year, did the organization solicit of									
•	to be sold to raise funds rather than to be m								Yes	☐ No
Pai	rt IV Escrow and Custodial Arran									
	reported an amount on Form 990, Pa	_ ,	J	- 01 gar 112ano				,, , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
10	ls the organization an agent, trustee, custod		liary for	contribution	s or other as	sets not in	ncluded			
142	on Form 990, Part X?		_						Yes	X No
h	If "Yes," explain the arrangement in Part XIII	and complete the fe	llouina	tabla:		*************	*******		_ 100	110
D	ii res, explain the arrangement in Part Alit	and complete the to	illowing	labie.					Amount	
	Danisais a hataaa						4-		Amount	
C	Beginning balance									
d	Additions during the year								-	
е	Distributions during the year						1e			
f	Ending balance						1f		1,,	1 1 2 2
	Did the organization include an amount on F						/?	Ь	Yes	No
	If "Yes," explain the arrangement in Part XIII.									<u> </u>
Pai	t V Endowment Funds. Complete									
		(a) Current year		rior year	(c) Two year				(e) Four y	
1a	Beginning of year balance	3,326,004.	3	,256,414.		2,866.		16,285.		93,822.
b	Contributions	0.		94,590.				50,000.		77,440.
C	Net investment earnings, gains, and losses	-999,061.		-25,000.	3:	3,548.		34,021.		54,977.
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs						8	77,440.		
f	Administrative expenses									
g	End of year balance	2,326,943.	3	,326,004.	3,25	5,414.	3,2	22,866.	3,6	16,285.
2	Provide the estimated percentage of the cur-	rent year end balanc	e (line 1	g, column (a	i)) held as:					
а	Board designated or quasi-endowment		_%							
ь	Permanent endowment > 100.00	%								
C	Temporarily restricted endowment ▶									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	-	ation the	at are held a	nd administe	red for the	organiz	ation		
	by:	_					_		Y	es No
	(i) unrelated organizations								3a(i) 2	K
	700 L. I. I. I.								0 - (22)	X
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the							************		
Par						•				
	Complete if the organization answere). Part I\	√. line 11a. S	ee Form 990), Part X, lir	ne 10.			
	Description of property	(a) Cost or of		(b) Cost			umulate	d T	(d) Book v	alue
	bosonphon of property	basis (investr		basis (eciation	~	(-,	
12	Land	,	/		7				 	
	Buildings									
				9.28	5,531.	1.04	19,54	18.	8,235	983.
	Leasehold improvements		-		7,056.		38,26		1,098	
	Equipment			±,55	. , 550 1	۵,	, (_,000,	, , , , , ,
	Other		V ook	nn /Dl line 1	(lo.)				9,334	771
ı otal	. Add lines 1a through 1e. (Column (d) must e	чи ш гопп 990, Ра п.	A, COIUI	ini (D), IIII U 1	<i>vc.)</i>					
								scnedule	D (Form 9	19 0) 2015

Part VII Investments - Other Securities.	age
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) Inflamous (c	-50
(a) Description of security or category (notuding name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (d) Closely-held equity interests (d) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must agual Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (d) (e) Method of valuation: Cost or end-of-year market value (f) (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value	
(2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6)	e
(2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part Viii Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (3) (4) (5) (6) (7)	
(3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (3) (4) (5) (6) (7)	_
(A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
Total. (Col. (b) must egual Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	_
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (3) (4) (5) (6) (7)	
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7)	
(1) (2) (3) (4) (5) (6) (7)	
(2) (3) (4) (5) (6) (7)	_
(3) (4) (5) (6) (7)	
(4) (5) (6) (7)	
(5) (6) (7)	_
(6) (7)	
(7)	
(0)	
(8)	
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	_
Part IX Other Assets.	
Land of the state	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value	
(1)	
(3)	
(4)	
(5)	_
(6)	_
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.	_
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value	
(1) Federal income taxes (2) CAMPAIGN DESIGNATIONS PAYABLE 194,493.	
(2) CAMPAIGN DESIGNATIONS PAYABLE 194,493.	

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	CAMPAIGN DESIGNATIONS PAYABLE	194,493.
(3)	PENSION AND POSTRETIREMENT	
(4)	OBLIGATION	5,861,813.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	6,056,306.

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

644,912.

Schedule D (Form 990) 2015

RESERVE FOR UNCOLLECTABLE RECEIVABLES FOR CAMPAIGN

532054 09-21-15

Schedule D (Form 990) 2015 UNITED WAY OF NEW YORK CITY Part XIII Supplemental Information (continued)	13-2617681 Page 5
DONOR DESIGNATIONS	16,408,172.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	17,053,084.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
PENSION RELATED CHANGES	1,499,078.
PROVISION FOR UNCOLLECTIBLE RECEIVABLES FOR CAMPAIGN	
CHANGE IN PERPETUAL TRUST	46,450.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,545,528.
	×
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATIONS	16,408,172.
· · · · · · · · · · · · · · · · · · ·	
	
	

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(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.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

UNITED	WAY OF NEW YORK CI	TY			13-2617	681		
Part I Fundraising Activities required to complete this pa	5. Complete if the organization answert.	ered "\	es" o	n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not		
a Mail solicitations b M Internet and email solicitations c M Phone solicitations d M In-person solicitations	e X Solicita f X Solicita g X Special	tion of tion of fundra	non-g gover aising	overnment grants nment grants events				
2 a Did the organization have a written key employees listed in Form 990, I b If "Yes," list the ten highest paid incompensated at least \$5,000 by the	Part VII) or entity in connection with part VII) or entities (fundraisers) pure	profess	ional 1	fundraising services?	Yes			
(i) Name and address of individual or entity (fundraiser) (ii) Activity		(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
PREMIERE EVENTS PLUS, INC -		Yes	No					
1441 BROADWAY SUITE 5001, NEW	EVENT MANAGEMENT	Х	ļ	1,912,643.	171,750.	1,740,893.		
JFM GROUP - 629 FIFTH AVE, STE 106, PELHAM, NY 10803	EVENT MANAGEMENT	х		862,751.	55,000.	807,751.		
MAX MARA ~ 813 MADISON AVENUE, NEW YORK, NY 10065	CO-VENTURE	x		1,657.	0.	1,657.		
THE PROMETHEUS EXCHANGE LLC -	CO-VENTURE	Α.	_	1,007.	0.	1,007.		
170 EAST 88TH STREET, SUITE	FUNDRAISING COUNSEL		x	0.	106.355.	-106,355.		
Total								
3 List all states in which the organization or licensing. NY, NJ, CT, AL, AK, AR, CA, OK, OR, PA, RI, SC, TN, UT,	CO,DC,FL,GA,HI,IL,							
	, , , , , , , , , , , , , , , , , , , ,							
					,			

Schedule G (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK CITY 13-2617681 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 Part II of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events GRIDIRON (add col. (a) through GALA WLC LUNCHEON col. (c)) (total number) (event type) (event type) 3,039,172. 974,642. 263,778. 1,800,752. 1 Gross receipts _____ 1,664,962. 874,715. 45,528. 2,585,205. 2 Less: Contributions 453,967. 135,790. 99,927. 218,250. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expense: 6 Rent/facility costs 7 Food and beverages 8 Entertainment 340,588. 99.927. 453,967. 9 Other direct expenses 453,967. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct 4 Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ______ Yes b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2015 UNITED WAY OF NEW YORK CITY	13-2617681 Page 3
11 Does the organization conduct garning activities with nonmembers?	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	1 1
a The organization's facility	
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events be	books and records:
Name >	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gamin	g revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization	and the amount
of gaming revenue retained by the third party \$ = c f "Yes," enter name and address of the third party:	
c ii Tes, enter name and address of the tring party.	
Name	
Address >	
16 Gaming manager information:	
Name	
Gaming manager compensation ▶ \$	
Description of services provided	
Description of services provided	
Director/officer Employee Independent contractor	
47 Mondatow, distributions	
17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceed	ds to
retain the state gaming license?	——————————————————————————————————————
b Enter the amount of distributions required under state law to be distributed to other exempt organizations.	ations or spent in the
organization's own exempt activities during the tax year > \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (i	ii) and (v); and Part III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAI	D FUNDRATSERS:
Deniabold o, Take 1, dian 20, dibt of the intender the	
(I) NAME OF FUNDRAISER: PREMIERE EVENTS PLUS, INC	
(I) ADDRESS OF FUNDRAISER: 1441 BROADWAY SUITE 5001,	NEW YORK, NY 10018
(I) NAME OF FUNDRAISER: JFM GROUP	
(I) ADDRESS OF FUNDRAISER: 629 FIFTH AVE, STE 106, P	ELHAM, NY 10803
to a contract of a contract of the second se	
(I) NAME OF FUNDRAISER: MAX MARA	
/T/ MENTE OF FORDISHING MAY MANY	

Schedule G (Form 990 o	r 990-EZ) UNITED WAY OF NEW YORK CITY	13-2617681 Page 4
Part IV Supplem	nental Information (continued)	
(I) ADDRESS	OF FUNDRAISER: 813 MADISON AVENUE, NEW YORK, NY	10065
(I) NAME OF	FUNDRAISER: THE PROMETHEUS EXCHANGE LLC	
(I) ADDRESS	OF FUNDRAISER:	
170 EAST 88T	H STREET, SUITE 6H, NEW YORK, NY 10128	
		
		
:		
· · · · · · · · · · · · · · · · · · ·		

SCHEDULE (Form 990)

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

tion answered "Yes" on Form 990, Part IV, line 21 or 22.

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

■ Attach to Form 990.

Complete if the organiza		Library of Contract of the second
	Department of the Treasury	Internal Revenue Service

Name of the organization

Open to Public OMB No. 1545-0047 Inspection

≗ Employer identification number 13-2617681 X Yes 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 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. UNITED WAY OF NEW YORK CITY criteria used to award the grants or assistance? Part I General Information on Grants and Assistance 2 Des

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed,	5,000. Part II can	ı be duplicated if additi	onal space is need	ed,			f
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFTER SCHOOL ALL STARS OF NYC							ATTENDANCE IMPROVEMENT
8000 UTOPIA PKWY							DROPOUT PREVENTION GERUICES (AIDS) THANKS AND
JAMAICA, NY 11439	11-3306766	501(C)(3)	346,999.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
BRONZWORKS							DROPOUT PREVENTION
SU EAST TREMONT AVE.							SERVICES (AIDP)-UWNYC AND
BRONK, NY 10453	13-3254484	501(C)(3)	521,709.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
CAMBA							DROPOUT PREVENTION
1720 CHURCH AVENUE, ZND FL							SERVICES (AIDP)-UWNYC AND
BROOKLYN, NY 11226	11-2480339	501(C)(3)	275,560.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
CATHOLIC CHARITIES COMMUNITY						-	DROPOUT PREVENTION
SERVICES, ARCHDIOCESE OF NY - 1011							SERVICES (AIDP)-UWNYC AND
FIRST AVENUE - NEW YORK, NY 10022	13-5562184	501(C)(3)	403,611.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
CENTER FOR SUPPORTIVE SCHOOLS							DROPOUT PREVENTION
461 GRAND STREET							SERVICES (AIDP)-UWNYC AND
BROOKLYN, NY 11211	22-2962532	501(C)(3)	439,478.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
KAST SIDE HOUSE INC.							DROPOUT PREVENTION
337 ALEXANDER AVE.							SERVICES (AIDP)-UWNYC AND
BRONX, NY 10454	13-1623989	501(C)(3)	1,339,866.	0.			THE NEW YORK CITY

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

3 Enter total number of other organizations see the Instructions for Form 990.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2015)

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VOR X	
T NEW	
WAY OF	
6	5

Schedule (Form 990) UNITED WAY OF	Y OF NEW	NEW YORK CLTY					13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL-PURNTE							ATTENDANCE IMPROVEMENT DROPOUT PREVENTION
211 SOUTH 4TH STREET							SERVICES (AIDP)-UMNYC AND
BROOKLYN, NY 11211	11-2614265	501(C)(3)	362,607.	0			THE NEW YORK CITY
TANGLM THE DESTRUCTION OF THE PROPERTY OF THE							ATTENDANCE IMPROVEMENT
71 STH AVENUE							DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10003	23-7413005	501(C)(3)	503,424.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
	٠						DROPOUT PREVENTION
137 EAST 25TH STREET, 2ND FLOOR	1 0 0 0 0		,				SERVICES (AIDP)-UWNYC AND
NEW YORK, DY 10010	13-3629485	501(C)(3)	692,666.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
							DROPOUT PREVENTION
305 SEVENTH AVENUE, 9TH FL	1		,				SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10001	13-5598710	501(C)(3)	949,377.	0			THE NEW YORK CITY
The state of the s							ATTENDANCE IMPROVEMENT
GRAND STREET SEPTERMENT					-	-	DROPOUT PREVENTION
SO PITT STREET	1						SERVICES (AIDP) - UWNYC AND
NEW YORK, NY 10002	13-5562230	501(C)(3)	364,126.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
HENRY STREET SETTLEMENT							DROPOUT PREVENTION
							SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10002	13-1562242	501(C)(3)	287,279.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
MAKE THE ROAD NY							DROPOUT PREVENTION
							SERVICES (AIDP)-UWNYC AND
BROOKLYN, NY 11237	11-3344389	501(C)(3)	807,630.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
							DROPOUT PREVENTION
SVELOPMENT - 130 SI		-					SERVICES (AIDP)-UWNYC AND
- STATEN ISLAND, NY 10301	23-7085239	501(C)(3)	638,483.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
NITY LEARNING S							DROPOUT PREVENTION
YORK NY 10004	46-1227433	501(c)(3)	1 330 435	c			SERVICES (AIDP)-UWNYC AND
			//-				Schodule (Form 000)

LTY	and Organizations in the United States (Schedule (Form 990), Part
VAY OF NEW YORK CITY	ments a
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e I (Form 990)	Continuation of
Schedule	Part II

Fart 11 Communication of Grams and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II.)	ASSISTANCE TO GO	vernments and Organ	lizations in the Ur	nted States (Sche	aule i (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERSHIP WITH CHILDREN, INC.							ATTENDANCE IMPROVEMENT DROPOUT PREVENTION
WAY,							SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10007	13-5596751	501(C)(3)	1,006,674.	0			THE NEW YORK CITY
THAT COURSE A COURT OF THE PARTY OF THE PART							ATTENDANCE IMPROVEMENT
FAIRWAIS TO LEADERSHIP 598 BROADWAY							DROPOUT PREVENTION
NEW YORK, NY 10012-3352	38-3886413	501(C)(3)	725,345.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
MITY DEVELOPMENT							DROPOUT PREVENTION
ATION - 902 BRC							SERVICES (AIDP)-UWNYC AND
FLOOR - NEW YORK, NY 10010	13-2707665	501(C)(3)	363,812.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
SCAN-NEW YORK							DROPOUT PREVENTION
_							SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10128	13-2912963	501(C)(3)	312,966.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
SCO FAMILY OF SERVICES							DROPOUT PREVENTION
14						•	SERVICES (AIDP) - UWNYC AND
GLEN COVE, NY 11542	11-2777066	501(C)(3)	283,563.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
on .					-		DROPOUT PREVENTION
FOUNDATION - 58-12 QUEENS BLVD -							SERVICES (AIDP)-UWNYC AND
WOODSIDE, NY 11377	11-3112635	501(C)(3)	1,003,204.	0			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
							DROPOUT PREVENTION
2 KINGSLAND AVENUE, 2ND FLOOR							SERVICES (AIDP) - UWNYC AND
BROOKLYN, NY 11211	51-0192170	501(C)(3)	354,145,	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
GE,							DROPOUT PREVENTION
UNIVERSITY - 525 W 120TH ST - NEW							SERVICES (AIDP) - UWNYC AND
YORK, NY 10027	13-1624202	501(C)(3)	297,774.	0.			THE NEW YORK CITY
							ATTENDANCE IMPROVEMENT
5							DROPOUT PREVENTION
IVES - 121 AV	0	1	0 0	•			SERVICES (AIDP) - UWNYC AND
AMERICAS - NEW YORK, NY 10013	13-6127348	501(C)(3)	368,428.	0.			
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Schedule I (Form 990) UNITED WAY OF NEW YORK CITY

Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Fait II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	izations in the Ur	ited States (Sche	dule i (Form 990), Pari	tII.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CHILDREN'S AID SOCIETY							ATTENDANCE IMPROVEMENT DROPOUT PREVENTION
105 B. 22ND STREET							SERVICES (AIDP)-UWNYC AND
NEW YORK, NY 10010	13-5562191	501(C)(3)	1,409,771.	0.			THE NEW YORK CITY
attionermore office weath							ATTENDANCE IMPROVEMENT
UNDAN ANIS FARINGEBLIF 414 BROADWAY FL							DROPOUT PREVENTION
NEW YORK, NY 10013	13-3554734	501(C)(3)	495,125.	0			THE NEW YORK CITY
							READNYC- READNYC IS A
ATAPE GROUP, LLC		·					
555 KAPPOCK STREET			1	ı			AND COLLECTIVE STRATEGY
BRONK, NY 10463	46-1739670		356,846.	0.			TO SUPPORT CHILDREN,
					-		READNYC- READNYC IS A
SCHOOL CENTER FOR NYC							COMPREHENSIVE, ALIGNED,
0	1						AND COLLECTIVE STRATEGY
NEW YORK, NY 10111	13-3297197	501(C)(3)	20,000	0			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
CHILD & FAMILY POLICY CENTER							COMPREHENSIVE, ALIGNED,
STH AVENUE	1						AND COLLECTIVE STRATEGY
DES MOINES, IA 50309	42-1378567	501(C)(3)	49,971.	0			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
CHILDREN'S DEFENSE FUND							COMPREHENSIVE, ALIGNED,
N							AND COLLECTIVE STRATEGY
WASHINGTON, NY 20001	52-0895622	501(C)(3)	26,400.	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
CITY YEAR, INC.					•		COMPREHENSIVE, ALIGNED,
287 COLOMBUS							AND COLLECTIVE STRATEGY
BOSTON, NY 02116	22~2882549	501(C)(3)	180,000.	0			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
YORK - 105 EAST 22ND STREET, 2ND							AND COLLECTIVE STRATEGY
FL - NEW YORK, NY 10010	13-5562202	501(C)(3)	264,618.	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
							COMPREHENSIVE, ALIGNED,
NO I	1		1	,			
BROOKLYN, NY 11208	11-2683663	501(C)(3)	12,000.	0.			TO SUPPORT CHILDREN,
							Cohedial (Come 000)

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Schedule I (Form 990) UNITED WAY OF NEW YORK	Y OF NEW	YORK CITY			:		13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	wernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							READNYC- READNYC IS A
EAST SIDE HOUSE INC.							COMPREHENSIVE, ALIGNED,
337 ALEXANDER AVE.							AND COLLECTIVE STRATEGY
BRONK, NY 10454	13-1623989	501(C)(3)	865,510.	0			TO SUPPORT CHILDREN,
EXPANDED SCHOOLS							COMPREHENSIVE, ALIGNED,
144U HKOADWAY, 16TH FLR	13-4004600	501/07/31	99	c			AND COLLECTIVE STRATEGY
oron in the same	2004	101101	יחרב יחחד	2			LO SUFFORT CHILDREN,
							READNYC- READNYC IS A
GENERATION READY							COMPREHENSIVE, ALIGNED,
352 SEVENTH AVE							AND COLLECTIVE STRATEGY
NEW YORK, NY 10001	13-3762096	501(C)(3)	310,000.	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
HOUGHTON MIFFLIN HARCOURT			_				COMPREHENSIVE, ALIGNED,
222 BERKELEY STREET							AND COLLECTIVE STRATEGY
BOSTON, MA 02116-3764	80-0277046		73,703.	.0			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
INWOOD HOUSE							COMPREHENSIVE, ALIGNED,
320 EAST 82ND STREET							AND COLLECTIVE STRATEGY
NEW YORK, NY 10028	13-5562254	501(C)(3)	180,000.	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
KINETIC LEARNING ENTERPRISES							COMPREHENSIVE, ALIGNED,
205 ROCKINGHAM ROW				-			AND COLLECTIVE STRATEGY
PRINCETON, NY 08540	27-0274973		23,000.	.0			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
PLANET YOUNG							COMPREHENSIVE, ALIGNED,
125-28 QUERNS BLVD							AND COLLECTIVE STRATEGY
KEW GARDENS, NY 11415	45-5296107		9,437,	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
REACH OUT AND READ OF GREATER NEW							COMPREHENSIVE, ALIGNED,
YORK - 30 EAST 33RD STREET - NEW							AND COLLECTIVE STRATEGY
YORK, NY 10016	13-4080045	501(C)(3)	15,000.	0.			TO SUPPORT CHILDREN,
							READNYC- READNYC IS A
							COMPREHENSIVE, ALIGNED,
80 MAIDEN LANE, 11TH FLOOR							AND COLLECTIVE STRATEGY
NEW YORK, NY 10038	13-4091062	501(C)(3)	216,265.	.0			TO SUPPORT CHILDREN,
							Schedule i (Form 990)

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Schedule I (Form 990) UNITED WAY	Y OF NEW YORK	YORK CITY					13-2617681 Page 1
Fart II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	overnments and Organ	izations in the Ur	nited States (Sche	dule I (Form 990), Pa	лII.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROAD TO SUCCESS							READNYC- READNYC IS A
307 W 38TH ST STELLOL							COMPREHENSIVE, ALIGNED,
NEW YORK, NY 10018	41-2166096	501(C)(3)	180,000.	0			
							READNYC- READNYC IS A
SAFIR & ASSOCIATES LLC							COMPREHENSIVE, ALIGNED,
OAKLAND, CA 94610	81-1068039		207,000	0			AND COLLECTIVE STRATEGY
TARRYTOWN HOUSE ESTATE &							READNYC- READNYC IS A
CONFERENCE CENTER - 49 EAST							COMPREHENSIVE, ALIGNED,
SUNNYSIDE LANE - TARRYTOWN, NJ							AND COLLECTIVE STRATEGY
10591	20-2373966		21,410.	.0			TO SUPPORT CHILDREN,
				•			READNYC- READNYC IS A
							COMPREHENSIVE, ALIGNED,
MENT CORP -	0	1	1	,			AND COLLECTIVE STRATEGY
SIREST - BRONA, NY 10452	11-3099604	501(C)(3)	168,395.	0		,	TO SUPPORT CHILDREN,
ATT WEEKE TOWN							FOOD ASSISTANCE
MCGLAUKEI LLP							COLLABORATIVE THE FAC
COLUMN TA DECON				,			KXISTS FOR THE PURPOSE OF
DAVENFORT, IA UGSUZ	4Z-0/143Z5		20,000	0	ŀ		INCREASING EQUITY AND
CHERACOCIONI PACEDATORO TATA						-	HPNAP HELPS ENSURE THE
RADO 1000 MENTED							ACCESSIBILITY AND
BENOVIEW WY 11220	000000000000000000000000000000000000000		L	•			AVAILABILITY OF SAFE,
THOOMETIN, MY LIESO	6500005-22		.210,62	0			NUTRITIOUS FOOD IN NYC'S
ACHDAME TODART. OR AMBOTON							HPNAP HELPS ENGURE THE
AS DECEMBER OF MENTOR							ACCESSIBILITY AND
į							AVAILABILITY OF SAFE,
NEW YORK, NY LUGGE	13-3918814	501(C)(3)	5,125.	0			NUTRITIOUS FOOD IN MYC'S
							HPNAP HELPS ENSURE THE
BALTER SALES COMPANY, INC.							ACCESSIBILITY AND
≽ı							AVAILABILITY OF SAFE,
NEW YORK, NY 10002	13-1911598		130,652.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
BENZ'S FOOD PRODUCTS, INCORPORATED							ACCESSIBILITY AND
352 ALBANY AVKNUK	0000						AVAILABILITY OF SAFE,
BROOKEIN, MI LIGIS	11-204143U		54,325.	0			NUTRITIOUS FOOD IN NYC'S
							Schodule I (Earn 000)

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Schedule (Form 990) UNITED WAY OF	Y OF NEW	NEW YORK CITY				:	13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AND THE ADDRESS OF THE PERSON							HPNAP HELPS ENSURE THE
CKANBERRY HALL FARM							ACCESSIBILITY AND
							AVAILABILITY OF SAFE,
COOKSTOWN, NO 08351	22-2897065		76,128.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
217-44% OSTU ANTENTION							ACCESSIBILITY AND
QUEENS VILLAGE, NY 11429	11-1748460		35 381.	o			AVAILABILITY OF SAFE,
							HPNAP HELPS ENSURE THE
DAVID ELLIOT POULTRY FARM							ACCESSIBILITY AND
			_				AVALLABILITY OF SAFE,
SCRANTON, PA 18505	24-0835679		33,127.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
DRISCOLL FOODS							ACCESSIBILITY AND
174 DELAWANNA							AVAILABILITY OF SAFE,
CLIFTON, NJ 07014	22-3482240		4,114,255.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
FRATERNITE NOTRE DAME, INC				•			ACCESSIBILITY AND
502 N CENTRAL AVENUE							AVAILABILITY OF SAFE,
CHICAGO, IL 60644	13-3600714	501(C)(3)	5,125.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
GOLDEN EARTHWORM ORGANIC FARM, LLC							ACCESSIBILITY AND
652 PECONIC BAY BLVD,, P.O BOX 871							AVAILABILITY OF SAFE,
JAMESPORT, NY 11947	41-2170690		39,600.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
SHEPHEND SERVICES						•	ACCESSIBILITY AND
							AVAILABILITY OF SAFE,
NEW YORK, NY 10001	13-5598710	501(C)(3)	29,999.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
GRAND CKNTRAL NEIGHBORHOOD				-			ACCESSIBILITY AND
.,,							AVAILABILITY OF SAFE,
NEW YORK, NY 10016-8648	13-3534255	501(C)(3)	5,000.	0			NUTRITIOUS FOOD IN NYC'S
					•		HPNAP HELPS ENSURE THE
GROWNYC							ACCESSIBILITY AND
SI CHAMBERS STREET, RM	4	1	4	•			AVAILABILITY OF SAFE,
	13-2/02405	pul(c)(3)	30,000	0.			NUTRITIOUS FOOD IN NYC'S
							Schodule I (Form 000)

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Schedule (Form 990) UNITED WAY OF NEW YORK	Y OF NEW	YORK CITY					13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Pa	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							HPNAP HELPS ENSURE THE
HEARTY ROOTS FARM							ACCESSIBILITY AND
F.O BOX 2//			1				AVAILABILITY OF SAFE,
TIVOLI, NY 12583	20-2925491		51,840.	0			NUTRITIOUS FOOD IN NYC'S
TAN HIS DESCRIPTION METORINATION							HPNAP HELPS ENSURE THE
351 E. 74TH STREET							ACCESSIBILITY AND AVAILABILITY OF SAFE
NEW YORK, NY 10021	13-1635255	501(C)(3)	29,998.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
							ACCESSIBILITY AND
9 - 29TH STREET							AVAILABILITY OF SAFE,
BROOKLYN, NY 11232	11-3328605		6,494.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
NEIGHBORS TOGETHER							ACCESSIBILITY AND
2094 FULTON STREET							AVAILABILITY OF SAFE,
BROOKLYN, NY 11233-6009	11-2632109	501(C)(3)	5,125,	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
OVERCOMING LOVE MINISTRIES							ACCESSIBILITY AND
7814 ROCKAWAY BLVD	,						AVAILABILITY OF SAFE,
WOODHAVEN, NY 11421-2926	11-2774575		5,125.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
RED APPLE FRUIT AND VEGETABLE							ACCESSIBILITY AND
455 ALBANY AVENUE							AVAILABILITY OF SAFE,
BROOKLYN, NY 11213	06-2607071		27,637.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
RUSSO'S ROOTS LLC							ACCESSIBILITY AND
277 N. SOCIETY RD		-					AVAILABILITY OF SAFE,
CANTEBURRY, CT 06331	47-2906381		23,760.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
SALEM COMMUNITY SERVICE COUNCIL							ACCESSIBILITY AND
							AVAILABILITY OF SAFE,
NEW YORK, NY 10027	13-2665561	501(C)(3)	29,993.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
SALEM UNITED METHODIST CHURCH							ACCESSIBILITY AND
ZISU ADAM CLAYTON POWELL JR. BVLD	200000		L	·			AVAILABILITY OF SAFE,
- 1	70400CT-0C	DOI(C)(3)	000,4	0.			NUTRITIOUS FOOD IN NYC'S
							Cohodula I (Form 000)

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Schedule I (Form 990) UNITED WAY OF NEW YORK CITY Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I Control of Con	UNITED WAY OF NEW YORK	YORK CITY		Chool Charles			13-2617681 Page 1
(a) Name and address of	(b) FIN	(c) IBC section	fell Amount of	(e) Amount of	Mathod of	(all Description of	(A) Diverse de consess
organization or government	(2)	if applicable	cash grant	assistance	(I) Melinod of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(n) Purpose of grant or assistance
							HPNAP HELPS ENSURE THE
SHABBOS FISH MARKET							ACCESSIBILITY AND
417 KINGSTON AVENUE	0000		1	•			AVAILABILITY OF SAFE,
DROOMLIN, MI 11225	TOGOSTS-TT		25,617.	0			NUTRITIOUS FOOD IN NYC'S
nata accatamona							HPNAP HELPS ENSURE THE
359 ROSS RULAND RD							ACCESSIBLLITY AND
SOUTH CAIRO, NY 12482	20-4541185		35,640.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
THE FARM AT MILLER'S CROSSING							ACCESSIBILITY AND
81 ROXBURY ROAD							AVAILABILITY OF SAFE,
HUDSON, NY 12534	14-1811452		52,272.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENGURE THE
THE RIVER FUND NEW YORK, INC.							ACCESSIBILITY AND
							AVAILABILITY OF SAFE,
RICHMOND HILL, NY 11418	11-3450363	501(C)(3)	5,000.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
UNITED COACH LINE INC.							ACCESSIBILITY AND
3120 ARTHUR KILL ROAD							AVAILABILITY OF SAFE,
STATEN ISLAND, NY 10309	27-1227571		7,480.	0.			NUTRITIOUS FOOD IN NYC'S
		-					HPNAP HELPS ENSURE THE
							ACCESSIBILITY AND
DAG B. 144TH STREET	400		L	•			AVAILABILITY OF SAFE,
DROMA, MI LUESS-ZORRE	T3-4933909		5,145.	0			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENSURE THE
WHISTLE DOWN FARM							ACCESSIBILITY AND
_							AVAILABILITY OF SAFE,
HUDSON, NY 12534	46-2876339		53,280.	0.			NUTRITIOUS FOOD IN NYC'S
							HPNAP HELPS ENGURE THE
WINDFLOWER FARM							ACCESSIBILITY AND
OUSE							AVAILABILITY OF SAFE,
VALLEY FALLS, NY 12185	52-2336178		74,448.	0.			NUTRITIOUS FOOD IN NYC'S
							SOCIAL SERVICE BLOCK
AGRI PROCESSORS INCORPORATED							GRANT (SSBG) - THE SSBG
	1		i				TARGETS ADVOCACY WORK FOR
BROOKLYN, NY 11220	22-2885839		8,843.	0			EARLY CHILDHOOD EDUCATION
							Schedule I (Form 990)

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Schedule I (Form 990) UNITED WAY OF NEW YORK CITY Part II Continuation of Grants and Other Assistance to Consuments and Ornarizations in the Haited States (Schedule I Ferm 900) For Ha	Y OF NEW YORK	YORK CITY	- I ode ci socitorio	o de constante de la constante	- 1000 mm 27 3 club		13-2617681 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
			i		appraisal, orner)		SOCIAL SERVICE BLOCK
BENZ'S FOOD PRODUCTS, INCORPORATED							GRANT (SSBG) - THE SSBG
332 ALBANY AVENUE							ĕ
BROOKLYN, NY 11213	11-2841450		23,555.	0			EARLY CHILDHOOD EDUCATION
					,		SOCIAL SERVICE BLOCK
DAVID ELLIOT POULTRY FARM							GRANT (SSBG) - THE SSBG
SCRANTON, PA 18505	24-0835679		7,385,				TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION
							SOCIAL SERVICE BLOCK
DRISCOLL FOODS							GRANT (SSBG) - THE SSBG
174 DELAWANNA AVENUE			_				TARGETS ADVOCACY WORK FOR
CLIFTON, NJ 07014	22-3482240		1,018,747,	0.			EARLY CHILDHOOD EDUCATION
							SOCIAL SERVICE BLOCK
SHABBOS FISH MARKET							GRANT (SSBG) - THE SSBG
							TARGETS ADVOCACY WORK FOR
BROOKLYN, NY 11225	11-3180901		6,654.	0.			EARLY CHILDHOOD EDUCATION
							HURRICANE SANDY RECOVERY
Y HEALT							FUND (HSRF)-UWNYC SERVED
INC							AS THE FUND MANAGER FOR
STATEN ISLAND, NY 10301	13-3556132	501(C)(3)	25,000.	0			HSRF, HSRF HAS PROVIDED
							HURRICANE SANDY RECOVERY
ROCKAWAY YOUTH TASK FORCE, INC.							FUND (HSRF)-UWNYC SERVED
ZENG!							AS THE FUND MANAGER FOR
FAR ROCKAWAY, NY 11691	45-4926515	501(C)(3)	25,000.	0			HSRF, HSRF HAS PROVIDED
					•		FOOD SUPPORT CONNECT
BRONXWORKS							(FSC) FSC FACILITATES
57							AND IMPROVES NYC
BRONX, NY 10453	13-3254484	501(C)(3)	197,327.	.0			RESIDENTS' ACCESS TO SNAP
							FOOD SUPPORT CONNECT
ESE-AMERICAN PLANNING							(FSC) FSC FACILITATES
		-					AND IMPROVES NYC
YORK, NY 10012	13-6202692	501(C)(3)	136,063.	0			RESIDENTS' ACCESS TO SNAP
							FOOD SUPPORT CONNECT
AL							(FSC) FSC FACILITATES
							AND IMPROVES NYC
STATEN ISLAND, NY 10301	13-3556132	501(C)(3)	79,972,	0.			RESIDENTS' ACCESS TO SNAP
							Schedule (Form 990)

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Schedule I (Form 990) UNITED WAY OF NEW YORK	Y OF NEW	YORK CITY	:				13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD BANK FOR NEW YORK / FOOD							FOOD SUPPORT CONNECT
CHANGE - 39 BROADWAY, 10TH FLOOR -							(FSC) FSC FACILITATES AND IMPROVES NYC
NEW YORK, NY 10006	13-3036532	501(C)(3)	294,266.	0 .			RESIDENTS' ACCESS TO SNAP
							FOOD SUPPORT CONNECT
HINGER - 16 BRAVER STREET 3RD							(FSC) FSC FACILITATES
NEW YORK, NY 10004	13-3471350	501(C)(3)	192,792,	0			AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
							FOOD SUPPORT CONNECT
RIDGEWOOD BUSHWICK SENIOR CITIZENS							(FSC) FSC FACILITATES
COUNCIL, INC 217 WYCKOFF AVENUE	0		1	,			AND IMPROVES NYC
- BROOKLIN, NY LL43/	11-2453853	501(C)(3)	162,176.	0			RESIDENTS' ACCESS TO SNAP
URBAN UPBOUND							FOOD SUPPORT CONNECT
38-81 13TH ST							- 4
ISLAND CITY, NY 11101	86-1096987	501(C)(3)	75,685.	0.			RESIDENTS' ACCESS TO SNAP
The state of the s							HOUSING COURT ANSWERS
HOUSEING COOKIS ANSWERS							CRISIS SUPPORTS - THIS
MAN WALLES OF THE STORY OF THE	4	, , , , , , , , , , , , , , , , , , ,	4	,			
NEW LOKA, NY LOUIS	13-331/188	501(C)(3)	30,000.	0			ARREARS, UTILITY AND
CAUSE EFFECTIVE							BOARDSERVENYC-BOARD
505 EIGHTH AVENUE, SUITE 1212							
NEW YORK, NY 10018	13-3083978	501(C)(3)	.000,000	0.			
							BOARDSERVENYC-BOARD
TATES ISLAND NEP ASSOCIATION,			-				
of the contract of the contrac	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			,			AND PLACEMENT PROGRAM, IN
STRIEN TRIUND, NI TOSTI	20-3560375	50I(C)(3)	5,000.	0.			PARTNERSHIP WITH NYC
OWI WIBHOUSE TENE							CHANGE CAPITAL FUND
108-12 OTTENENS PLAT							
WOODGOM WILLS NY 11275	00000		4	ı			CHANGE CAPITAL FUND (CCF)
- 1	00-0003476		41,000.	0			ES A COLLABORATION OF 15
							CHANGE CAPITAL FUND -
125 WATDOW TANKE							CHANGE CAPITAL FUND THE
NAM YORK NY 10038	27_2522600	.07.07	100				CHANGE CAPITAL FUND (CCF)
- 1	41-3343305	DULICIUS	425,000.	0			IS A COLLABORATION OF 15
							1000 LV - 1 T - 1 O

	Y OF NEW	YORK CITY				1	13-2617681 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go		nizations in the Ur	ited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COPPLESS HILLS LOCAL DVELOPMENT							CAPITAL FUND
BROOKLYN NY 11208	11-2683563	501(C)(3)	171 200	c			CHANGE CAPITAL FUND (CCF)
			,				TE CADTUAL ETHIN
FIFTH AVENUE COMMITTEE							CHANGE CAPITAL FUND THE
294 SMITH STREET							CHANGE CAPITAL FUND (CCF)
BROOKLYN, NY 11231	11-2475743	501(C)(3)	179,400.	0			IS A COLLABORATION OF 15
						•	CHANGE CAPITAL FUND -
						-	CHANGE CAPITAL FUND THE
16 E. 34TH STREET							CHANGE CAPITAL FUND (CCF)
NEW YORK, NY 10016	23-7379473	501(C)(3)	110,000.	0			IS A COLLABORATION OF 15
							CHANGE CAPITAL FUND -
NEW SETTLEMENT APARTMENTS							CHANGE CAPITAL FUND THE
1512 TOWNSEND AVENUE							CHANGE CAPITAL FUND (CCF)
BRONX, NY 10452	14-1719016	501(C)(3)	164,375.	0			IS A COLLABORATION OF 15
							CHANGE CAPITAL FUND -
NONPROFIT FINANCE FUND							CHANGE CAPITAL FUND THE
70 WEST 36TH STREET 11TH FLOOR							CHANGE CAPITAL FUND (CCF)
NEW YORK, NY 10018	13-3238657	501(C)(3)	70,000.	0.			IS A COLLABORATION OF 15
							CHANGE CAPITAL FUND -
PUBLIC WORKS PARTNERS LCC							CHANGE CAPITAL FUND THE
							CHANGE CAPITAL FUND (CCF)
NEW YORK, NY 10001	27-3647604		33,900.	0			IS A COLLABORATION OF 15
							CHANGE CAPITAL FUND -
							CHANGE CAPITAL FUND THE
2 KINGSLAND AVENUE, 2ND		-					CHANGE CAPITAL FUND (CCF)
BROOKLYN, NY 11211	51-0192170	501(C)(3)	172,495.	0.			IS A COLLABORATION OF 15
							EXPANDING NYC SERVICE -
							EXPANDING NYC SERVICE
253 BROADWAY, 6TH FL							YEARS PROJECT IS TO
NEW YORK, NY 10007	13-3783906	501(C)(3)	225,000.	.0			IMPLEMENT A MULTI-YEAR
							HPNAPHELPS ENSURE THE
CODERO HOSTING							ACCESSIBILITY AND
8735 ROSEHILL ROAD							AVAILABILITY OF SAFE,
LENEXA, KS 66215	27-0214713		13,138.	0.			NUTRITIOUS FOOD IN MYC'S
							Schedule I (Form 990)

UNITED WAY OF NEW YORK CITY Schedule I (Form 990) (2015)

Page 2

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

rat III can de duplicated il additional space is needed.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
READINYC	8	22,249.	0.		
FOOD ASSISTANCE COLLABORATIVE	1	25,239.	0.		
HPNAP	2	41,880.	0		Del
BOARDSERVE NYC		19,900.	0		
CHANGE CAPITAL FUND	6	155,553.	0		
Part IV Supplemental Information. Provide the information required	uired in Part I, lin	e 2, Part III, column	(b), and any other ac	in Part I, line 2, Part III, column (b), and any other additional information.	
T I, LINE 2:					
AS PART OF THE PROCESS OF MONITORING	THE	COMMUNITY B.	BASED ORGAN	ORGANIZATIONS THAT	
UWNYC FUNDS, UWNYC REQUIRES A DETAILE	А	BUDGET TO IDE	IDENTIFY HOW	THE AGENCY	
INTENDS TO SPEND THE CONTRACT AWARD	D AND AN	EXPENDITURE	REPORT	TO	į
SUBSTANTIATE THE AMOUNT REQUESTED	FOR PAYMENT.	ENT. UWNYC	ALSO	REQUIRES AND	
REVIEW AGENCIES' PROGRAMMATIC DATA	AND	ACCOMPLISHMENTS.	TS. FINALLY,	LY, UWNYC	
CONDUCTS PROGRAMMATIC REVIEWS AT T	THE PROGRAM	SITES	AND PROVIDE	FEEDBACK.	

COLUMN (H): LINE 1, PART II,

Schedule I (Form 990) (2015)

NAME OF ORGANIZATION OR GOVERNMENT: AFTER SCHOOL ALL STARS OF NYC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: BRONXWORKS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

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THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: CAMBA

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

Part IV Supplemental Information

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT:

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT

CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NY

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

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THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR SUPPORTIVE SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: EAST SIDE HOUSE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: EL-PUENTE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

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THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: FAMILY HEALTH INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GLOBAL KIDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GRAND STREET SETTLEMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: MAKE THE ROAD NY

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVE/UFT

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: PARTNERSHIP WITH CHILDREN, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: PATHWAYS TO LEADERSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

Part IV | Supplemental Information

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.

NAME OF ORGANIZATION OR GOVERNMENT:

PHIPPS COMMUNITY DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SCAN-NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SCO FAMILY OF SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SPORTS & ARTS IN SCHOOLS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: ST. NICKS ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: TEACHER COLLEGE, COLUMBIA UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: THE DOOR - A CENTER OF ALTERNATIVES

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: THE CHILDREN'S AID SOCIETY

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: URBAN ARTS PARTNERSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: ATAPE GROUP, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: THE NEW SCHOOL CENTER FOR NYC AFFAIRS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: CHILD & FAMILY POLICY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE,

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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.

NAME OF ORGANIZATION OR GOVERNMENT: CHILDREN'S DEFENSE FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: CITY YEAR, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY SERVICE SOCIETY OF NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

CYPRESS HILLS LOCAL DVELOPMENT CORPORATION

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(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: EAST SIDE HOUSE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: EXPANDED SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GENERATION READY

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: HOUGHTON MIFFLIN HARCOURT

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: INWOOD HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: KINETIC LEARNING ENTERPRISES

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: PLANET YOUNG

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

REACH OUT AND READ OF GREATER NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: READ ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: ROAD TO SUCCESS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SAFIR & ASSOCIATES LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

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NAME OF ORGANIZATION OR GOVERNMENT:

TARRYTOWN HOUSE ESTATE & CONFERENCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: MCGLADREY LLP

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: AGRI PROCESSORS INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: 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 NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: AGUDATH ISRAEL OF AMERICA

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: BALTER SALES COMPANY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: BENZ'S FOOD PRODUCTS, INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY

AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

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EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS
WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION
ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: CRANBERRY HALL FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: CURTIS WARD REFRIGERATION

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: DAVID ELLIOT POULTRY FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: DRISCOLL FOODS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: FRATERNITE NOTRE DAME, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GOLDEN EARTHWORM ORGANIC FARM, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY

AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

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EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS
WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION
ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: GRAND CENTRAL NEIGHBORHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: GROWNYC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTY ROOTS FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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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NAME OF ORGANIZATION OR GOVERNMENT: JAN HUS PRESBYTERIAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: KENOVER MARKETING CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

NAME OF ORGANIZATION OR GOVERNMENT: NEIGHBORS TOGETHER

NAME OF ORGANIZATION OR GOVERNMENT: OVERCOMING LOVE MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY

AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

ISSUES.

EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: RED APPLE FRUIT AND VEGETABLE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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

NAME OF ORGANIZATION OR GOVERNMENT: RUSSO'S ROOTS LLC

NAME OF ORGANIZATION OR GOVERNMENT: SALEM COMMUNITY SERVICE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: SALEM UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SHABBOS FISH MARKET

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: STONELEDGE FARM LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: THE FARM AT MILLER'S CROSSING

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY

AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT: WHISTLE DOWN FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: WINDFLOWER FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: AGRI PROCESSORS INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: BENZ'S FOOD PRODUCTS, INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: DAVID ELLIOT POULTRY FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: DRISCOLL FOODS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: SHABBOS FISH MARKET

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: ROCKAWAY YOUTH TASK FORCE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HURRICANE SANDY RECOVERY FUND

NEAR AND LONGER TERM ASSISTANCE TO INDIVIDUALS, FAMILIES AND

(HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF. HSRF HAS PROVIDED BOTH

ORGANIZATIONS IMPACTED BY THE HURRICANE.

NAME OF ORGANIZATION OR GOVERNMENT: BRONXWORKS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

CHINESE-AMERICAN PLANNING COUNCIL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: FOOD BANK FOR NEW YORK/ FOOD CHANGE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW YORK CITY COALITION AGAINST HUNGER

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: URBAN UPBOUND

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: HOUSING COURTS ANSWERS

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: CAUSE EFFECTIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: STATEN ISLAND NFP ASSOCIATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: ANAT GERSTEIN, INC.

(H) PURPOSE OF GRANT OR 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 TRACKING SYSTEMS, AND

DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY SOLUTIONS

(H) PURPOSE OF GRANT OR 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

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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.

NAME OF ORGANIZATION OR GOVERNMENT:

CYPRESS HILLS LOCAL DVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR 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

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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.

(H) PURPOSE OF GRANT OR 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

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COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY

REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT

NAME OF ORGANIZATION OR GOVERNMENT: FIFTH AVENUE COMMITTEE

ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR

MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND

DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: MDRC

(H) PURPOSE OF GRANT OR 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

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ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR

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DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: NEW SETTLEMENT APARTMENTS

(H) PURPOSE OF GRANT OR 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

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ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR

MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND

DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: NONPROFIT FINANCE FUND

(H) PURPOSE OF GRANT OR 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

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ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR

MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND

DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC WORKS PARTNERS LCC

(H) PURPOSE OF GRANT OR 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

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COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY

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ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR

MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND

DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: ST. NICKS ALLIANCE

(H) PURPOSE OF GRANT OR 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

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COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY

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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.

NAME OF ORGANIZATION OR GOVERNMENT: MAYORS FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

NAME OF ORGANIZATION OR GOVERNMENT: CODERO HOSTING

(H) PURPOSE OF GRANT OR ASSISTANCE: 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.

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.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number 13-2617681

P	art I Questions Regarding Compensation			-
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			1
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
Ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	1
	, , , , , , , , , , , , , , , , , , , ,			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			-
	X Form 990 of other organizations X Approval by the board or compensation committee			
			1	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	[
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			$\overline{}$
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	-		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			1
	contingent on the revenues of:			
а	The organization?	5a	L	X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			-
8	The organization?	6a		X
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? if "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Descriptions and in EQ 4050 C(-)2			

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.

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

	ſ							
		(E) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	able	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Saments	(n)-(n)(n)	In column (B) reported as deferred on prior Form 990
(1) SHEENA WRIGHT	Ξ	356,790.	0	1,544.	7,000.	17,413.	382,747.	0
PRESIDENT & CEO		0	0	0	0	0	• 1	0
(2) SUNITA SUBRAMANIAN	(i)	195,740.	0.	532.	3,946.	4,635.	204,85	0
間	≘		1.0	0	0	0		0
(3) LESLRIGH IRISH-UNDERWOOD	Θ	204,082.	0.	1,288.	4,100.	4,848.	214,318.	0
SNR VP OF MARKETING & COMM	(ii)		0.	0	0	0		0
GALLANT	(3)	194,616.	0	819.	4,000.	3,724.	203,159.	0
SNR VP OF CI	€	0	0	0	0	0		0
(5) ELENA PAK	(3)	145,321.	0.	323.	4,200.	15,406.	165,250.	0.
5	Œ		•0	0	0	0	0	0
JACQUELINE JENKINS	Θ	149,035.	0.	364.	3,000.	11,696.	164,095.	0
OF STRATEGY MANAGEMENT	Œ		0	0	0	0		0
	(E)	143,808.	0	2,599.	2,987.	.086,6	159,37	0
	Ξ		0	0	0	0		0
MINDEE H. BARHAM (FORMER)	Θ	164,45	0	.069	3,200.	29,005.	197,35	0
SEN. V.P. & CHIEF DEV. OFFICER	(11)	0	0	0	0	0	0	0.
(9) PATRICK MA	€	141,162.	0.	296.	2,800.	30,903.	175,161.	0
VP OF OPERATIONS	(II)	0	0	0	0	0	0	0
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Schedule J (Form 990) 2015

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

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

UNITED WAY OF NEW YORK CITY

Employer identification number 13-2617681

Pa	rt I Types of Property	_							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contr amounts repor Form 990, Part V	ted on	(d) Method of de noncash contribu	etermir		s
1	Art - Works of art		Items continuated	TOTHI 550, TERE V	itt, iii to 1gr				
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications		-						
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes	-							
8	Intellectual property								
9	Securities - Publicly traded					-			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or						-		
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18									
19	Food inventory								
20									
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (SPECIAL EVENT) X 6 204,800 FMV								
26	Other ()								
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organia	zation during	g the tax year for c	ontributions					
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement	29	<u>.</u>		1 1	
								Yes	No
30a	During the year, did the organization receive by								
	must hold for at least three years from the date								-
	exempt purposes for the entire holding period	?					30a		X
b	If "Yes," describe the arrangement in Part II.						31	x	}
31									
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								v
	contributions?							$\vdash \vdash$	X
	If "Yes," describe in Part II.		_						
33	If the organization did not report an amount in	column (c) f	or a type of prope	ty for which colun	nn (a) is ch	ecked,			
	describe in Part II.					D-23-1 54	(Fam::	0007	2045
_HA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	U.		Schedule M	(FOFM	33U) (ZU 15)

LHA

Schedule M	(Form 990) (2015)	UNITED	WAY	OF	NEW	YORK	CIT	Y.				61768		age 2
Part II	Supplemental is reporting in Part this part for any ac	information (b), dditional inform	Prov the num nation.	ide th ber of	e inform contrib	ation requ utions, the	aired by a numb	/ Part I, liner of item	nes 30b, 32 is received	2b, and 33 , or a com	, and whet bination of	her the org both. Also	anization complete	9
														
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Schedule M (Form 990) (2015)

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. Name of the organization

Employer identification number 13-2617681

UNITED WAY OF NEW YORK CITY	13-2617681
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
COMMUNITY-BASED NON-PROFITS TO TACKLE THE ROOT CAUSES OF	POVERTY. WE
DESIGN AND INVEST IN EVIDENCE-BASED INITIATIVES THAT ENSU	RE LOW-INCOME
NEW YORKERS ARE ABLE TO MEET BASIC NEEDS AND BUILD A BETT	ER FUTURE. WE
RIGOROUSLY EVALUATE OUR WORK AND USE LESSONS LEARNED TO L	EVERAGE A
WORLDWIDE NETWORK OF UNITED WAYS TO INFORM AND ADVANCE PU	BLIC POLICIES
THAT PREVENT AND ALLEVIATE POVERTY CITYWIDE. UNITED WAY O	F NEW YORK
CITY FOSTERS A MORE ROBUST AND EFFECTIVE NON-PROFIT SECTO	R BY WORKING
COLLECTIVELY WITH A CONSORTIUM OF NON-PROFITS WITH SHARED	GOALS AND
MEASUREMENT TO BRING SERVICES TO THE PUBLIC IN THE AREAS	OF EDUCATION,
INCOME AND HEALTH.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
WE ENVISION CARING COMMUNITIES WHERE ALL INDIVIDUALS AND	FAMILIES HAVE
ACCESS TO QUALITY EDUCATION AND THE OPPORTUNITY TO LEAD H	EALTHY AND
FINANCIALLY SECURE LIVES.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
ORGANIZATIONAL CAPACITY BUILDING:	
UNITED WAY OF NEW YORK CITY MOBILIZES RESOURCES, STABILIZ	E, 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

READNYC

READNYC 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

Schedule O (Form 990 or 990-EZ) (2015) Name of the organization Employer identification number UNITED WAY OF NEW YORK CITY 13-2617681 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 2015/2016 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 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 EMPOWERMENT

THE 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 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.

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 2015/16

UNITED WAY OF NEW YORK CITY

Employer identification number 13-2617681

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 2015/16

BOARDSERVENYC

OUR 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 REPORT

THE 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

UNITED WAY OF NEW YORK CITY

Employer identification number 13-2617681

HOUSEHOLDS, FOCUSING ON THOSE BELOW THE SELF-SUFFICIENCY STANDARD.

EXPENSES \$ 16,329,840. INCL GRANTS OF \$ 16,408,172. REVENUE \$ 330,597.

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

THE 990 DRAFT IS REVIEWED WITH OUR AUDIT COMMITTEE. ONCE APPROVED, THE 990

IS PROVIDED ELECTRONICALLY TO THE ENTIRE BOARD FOR ITS REVIEW AND COMMENT

AND THEN FILED WITH THE IRS.

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

UWNYC'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 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.

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

THE CEO'S COMPENSATION IS RECOMMENDED BY THE COMPENSATION COMMITTEE,

APPROVED BY THE EXECUTIVE COMMITTEE, AND REPORTED TO THE BOARD OF

DIRECTORS. THE BOARD HAS BEEN ASSISTED BY PROFESSIONAL COMPENSATION

CONSULTANTS, SULLIVAN AND COTTER. S&C GOES OUT TO THE MARKET AND REVIEWS

THE COMPENSATION OF CEOS IN NOT ONLY SIMILARLY SITUATED ORGANIZATIONS, BUT

OTHER ORGANIZATIONS TO WHICH UWNYC WOULD LOOK FOR A CEO IF THE NEED AROSE.

Employer identification number Name of the organization UNITED WAY OF NEW YORK CITY 13-2617681 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. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: 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, TX, UT, VA, WA, WV, WI, MA FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE. CONFLICTS OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE PROVIDED UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: PENSION RELATED CHANGES -1,499,078.PROVISION FOR UNCOLLECIBLE RECEIVABLES -644,912.CHANGE IN PERPETUAL TRUST -46,450.TOTAL TO FORM 990, PART XI, LINE 9 -2,190,440.FORM 990, PART XII, LINE 2C: HAS NOT BEEN CHANGED FROM THE PRIOR YEAR.

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization UNITED WAY OF NEW YORK CITY	Employer identification number 13-2617681
FORM 990, SCHEDULE I, PART II:	
SOME GRANTS ON SCHEDULE I WERE MADE TO ENTITIES THAT PROV	IDE SERVICES
TO NONPROFIT ORGANIZATIONS, WHICH ARE THE ULTIMATE BENEFI	
PROGRAM. THESE ENTITIES ARE ROSALIND KOTZ, SHANE KATHERIN	E SAFIR, AGRI
PROCESSORS INCORPORATED, BALTER SALES COMPANY INC., BENZ'	S FOOD
PRODUCTS INCORPORATED, CODERO'S HOSTING, CRANBERRY HALL F	ARM, CURTIS
WARD REFRIGERATION, DAVID ELLIOT POULTRY FARM, DRISCOLL F	OODS, GOLDER
EARTHWORM ORGANIC FARM LLC, HEARTY ROOTS FARM, J.GLEBOCKI	FARMS, MILK
NOT JAILS, RED APPLE FRUIT AND VEGETABLES, SHABBOS FISH M	ARKET,
STONELEDGE FARM LLC, THE FARM AT MILLER'S CROSSING, WHIST	LE DOWN FARM,
WINDFLOWER FARM, WENDY FLEISCHER, MICHAEL DAVIDSON, SOUOK	EYNA BOYE,
ALTERNATIVE GRAPHIC CONCEPTS, INC., INFOCUS SOLUTIONS, JE	ANETTE G.
NIGRO, ANAT GERSTEIN, INC. AND PUBLIC WORKS PARTNERS LLC.	