

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

2016Open to Public
Inspection**A** For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**UNITED WAY OF NEW YORK CITY**

Doing business as

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

205 EAST 42ND STREET

City or town, state or province, country, and ZIP or foreign postal code

NEW YORK, NY 10017**F** Name and address of principal officer: **GINA GOODENOW****SAME AS C ABOVE****D** Employer identification number**13-2617681****E** Telephone number**212-251-2431****G** Gross receipts \$ **70,177,864.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.UNITEDWAYNYC.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1968** **M** State of legal domicile: **NY****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: UNITED WAY OF NEW YORK CITY UNIQUELY WORKS WITH BUSINESS, GOVERNMENT AND (SEE SCHEDULE O)	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	34
	4	Number of independent voting members of the governing body (Part VI, line 1b)	34
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	151
	6	Total number of volunteers (estimate if necessary)	223
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 61,875,439. Current Year 61,565,929.
	9	Program service revenue (Part VIII, line 2g)	330,597. 120,419.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	433,978. 423,685.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	67,649. 366,362.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,707,663. 62,476,395.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	46,230,581. 45,463,779.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,502,569. 11,558,304.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	226,750. 206,000.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,029,566.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,946,812. 7,092,462.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	63,906,712. 64,320,545.
	19	Revenue less expenses. Subtract line 18 from line 12	-1,199,049. -1,844,150.
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)
21		Total liabilities (Part X, line 26)	27,602,315. 26,256,856.
22		Net assets or fund balances. Subtract line 21 from line 20	9,090,718. 9,619,134.

Part II Signature Block

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

Sign Here	Signature of officer	<i>Gina Goodenow</i>	Date	5/4/18
	GINA GOODENOW, SVP AND CFO Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	Firm's name	MARKS PANETH LLP	<i>Mark Paneth</i>	5/4/18
	Firm's address	685 THIRD AVENUE NEW YORK, NY 10017		Firm's EIN ▶ 11-3518842
				Phone no. 212-503-8800

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

☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

UNITED WAY OF NEW YORK CITY HELPS TO MOBILIZE OUR COMMUNITIES TO BREAK DOWN BARRIERS AND BUILD OPPORTUNITIES THAT IMPROVE THE LIVES OF LOW-INCOME NEW YORKERS, FOR THE BENEFIT OF ALL.
WE ENVISION CARING COMMUNITIES WHERE ALL INDIVIDUALS AND FAMILIES HAVE

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 21,573,043. including grants of \$ 19,797,536.) (Revenue \$)**EDUCATION:**

UNITED WAY OF NEW YORK CITY HAS DEVELOPED A CRADLE TO CAREER EDUCATION PROGRAM THAT SEEKS TO INCREASE THE NUMBER OF STUDENTS GRADUATING FROM HIGH SCHOOL, WHO ARE PREPARED FOR COLLEGE, AND ARE CAREER READY.

FOR EXAMPLES OF OUR EDUCATION INITIATIVES, SEE SCHEDULE O.

4b (Code:) (Expenses \$ 2,532,826. including grants of \$ 1,573,857.) (Revenue \$)**INCOME:**

UNITED WAY OF NEW YORK CITY PARTNERS WITH COMMUNITY BASED ORGANIZATIONS, FINANCIAL INSTITUTIONS, GOVERNMENT AGENCIES, AND OTHER STAKEHOLDERS TO REDUCE THE NUMBER OF FINANCIALLY INSECURE FAMILIES.

FOR EXAMPLES OF OUR INCOME STABILITY INITIATIVES, SEE SCHEDULE O.

4c (Code:) (Expenses \$ 8,784,192. including grants of \$ 7,156,382.) (Revenue \$)**HEALTHY FOOD ACCESS:**

UNITED WAY OF NEW YORK CITY INCREASES ACCESS TO HEALTHY FOODS AND IMPROVES NUTRITION HEALTH LITERACY TO INCREASE THE NUMBER OF LOW-INCOME FAMILIES LEADING HEALTHIER, MORE ACTIVE LIVES.

FOR EXAMPLES OF OUR HEALTH AND OTHER INITIATIVES, SEE SCHEDULE O.

4d Other program services (Describe in Schedule O.)(Expenses \$ 17,465,425. including grants of \$ 16,936,004.) (Revenue \$ 120,419.)**4e** Total program service expenses 50,355,486.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule OForm **990** (2016)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 81		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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 151		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
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
c 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
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 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.			
a 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
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒**Section 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 34 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 34		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

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

	Yes	No
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 chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	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 conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► CA, CT, DC, FL, GA, IL, MD, MA, MN, NJ, NY, NC

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►
GINA GOODENOW, SVP AND CFO. - (212) 251-4042
205 EAST 42ND STREET, NEW YORK, NY 10017

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOSEPH A. CABRERA DIRECTOR AND VICE CHAIR	1.00	X		X				0.	0.	0.
(2) CHERYL WILLS DIRECTOR (FORMER)	1.00	X						0.	0.	0.
(3) DONALD F. DONAHUE DIRECTOR, CO-CHAIR	1.00	X		X				0.	0.	0.
(4) ANDREW ALFANO DIRECTOR	1.00	X						0.	0.	0.
(5) BERNICE CLARK DIRECTOR	1.00	X						0.	0.	0.
(6) SUSAN L. BURDEN DIRECTOR AND SECRETARY	1.00	X		X				0.	0.	0.
(7) J. EMILIO CARRILLO, MD, MPH DIRECTOR	1.00	X						0.	0.	0.
(8) MARIANNE D. COOPER DIRECTOR	1.00	X						0.	0.	0.
(9) STEPHEN J. DANNHAUSER DIRECTOR	1.00	X						0.	0.	0.
(10) BRENDAN DOUGHER DIRECTOR	1.00	X						0.	0.	0.
(11) ROBERT A. DUPUY DIRECTOR (FORMER)	1.00	X						0.	0.	0.
(12) NEIL MASTERSON DIRECTOR	1.00	X						0.	0.	0.
(13) WILLIAM K. FLEMMING DIRECTOR	1.00	X						0.	0.	0.
(14) ROBERT FRIEDMAN DIRECTOR AND TREASURER	1.00	X		X				0.	0.	0.
(15) FELIX V. MATOS RODRIQUEZ, PH.D DIRECTOR	1.00	X						0.	0.	0.
(16) ISIDORE MAYROCK DIRECTOR	1.00	X						0.	0.	0.
(17) ANISH MELWANI DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TED MOUDIS DIRECTOR	1.00	X						0.	0.	0.
(19) ROBERT MULLEN DIRECTOR	1.00	X						0.	0.	0.
(20) DAVID OWEN DIRECTOR	1.00	X						0.	0.	0.
(21) JOSHUA B. MASON DIRECTOR	1.00	X						0.	0.	0.
(22) DENISE PICKETT DIRECTOR AND VICE CHAIR	1.00	X		X				0.	0.	0.
(23) JENNIFER RAAB DIRECTOR (FORMER)	1.00	X						0.	0.	0.
(24) BRAD ROTHBAUM DIRECTOR	1.00	X						0.	0.	0.
(25) MICHAEL SCHMIDTBERGER DIRECTOR AND CO-CHAIR	1.00	X		X				0.	0.	0.
(26) JEFFREY SHERMAN DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,261,560.	0.	142,003.
d Total (add lines 1b and 1c)								2,261,560.	0.	142,003.

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

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- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATAPE GROUP, LLC, 555 KAPOCK STREET, APT 26E, BRONX, NY 10463	INSTRUCTIONAL LEADERSHIP	499,790.
TECHBRIDGE, INC., 100 PEACHTREE STREET NW STE 2090, ATLANTA, GA 30303	SOFTWARE DEVELOPMENT	424,364.
WENDY FLEISCHER 674 CARROL STREET, #4, BROOKLYN, NY 11215	CHANGE CAPITAL FUND COORDINATOR	195,631.
SUZETTE HUNTE, 327 MACDONOUGH STREET, #2, BROOKLYN, NY 11233	STRATEGIC LEADERSHIP	166,000.
THE TASC GROUP, 153 WEST 27TH STREET, STE 405, NEW YORK, NY 10001	PUBLIC RELATIONS	145,790.

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

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SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2016)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) AMANI TOOMER DIRECTOR	1.00	X						0.	0.	0.
(28) DAVID TURNER DIRECTOR	1.00	X						0.	0.	0.
(29) KARYN TWARONITE DIRECTOR	1.00	X						0.	0.	0.
(30) LISA CARNOY DIRECTOR	1.00	X						0.	0.	0.
(31) CHARLES P WANG DIRECTOR	1.00	X						0.	0.	0.
(32) RUDOLPH WYNTER DIRECTOR (FORMER)	1.00	X						0.	0.	0.
(33) KYUNG B. YOON DIRECTOR	1.00	X						0.	0.	0.
(34) NANCY ZIMPER DIRECTOR (FORMER)	1.00	X						0.	0.	0.
(35) ROSSIE TURMAN III DIRECTOR	1.00	X						0.	0.	0.
(36) DIPTI GULATI DIRECTOR	1.00	X						0.	0.	0.
(37) STEVEN CHOI DIRECTOR	1.00	X						0.	0.	0.
(38) DR. EMMA JORDAN-SIMPSON DIRECTOR	1.00	X						0.	0.	0.
(39) KEVIN W. STONE DIRECTOR	1.00	X						0.	0.	0.
(40) SHEENA WRIGHT PRESIDENT & CEO	45.00			X				386,952.	0.	17,925.
(41) JOHN A. MCKEGNEY EXEC. VP & CFO (FORMER)	45.00			X				215,759.	0.	9,271.
(42) SUNITA SUBRAMANIAN GEN. COUNSEL & ASST.	45.00			X				195,308.	0.	4,631.
(43) SUSAN DAVIES SVP & CHIEF DEVELOP. OFFICER	45.00			X				132,851.	0.	10,007.
(44) OSCAR RAPOSO EXEC. V.P., COO & CFO	45.00			X				124,418.	0.	5,974.
(45) LESLEIGH IRISH-UNDERWOOD S.V.P & CHIEF MARKETING OFFICER	45.00				X			210,761.	0.	5,019.
(46) NICOLE GALLANT S.V.P & CHIEF IMPACT OFF.	45.00				X			201,558.	0.	3,851.
Total to Part VII, Section A, line 1c										

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	23,878,910.				
	b Membership dues	1b					
	c Fundraising events	1c	2,376,325.				
	d Related organizations	1d	10,401.				
	e Government grants (contributions)	1e	27,155,667.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,144,626.				
	g Noncash contributions included in lines 1a-1f: \$		53,000.				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a CAMPAIGN FEES	Business Code	900099	120,419.	120,419.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			120,419.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			243,748.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)				179,937.			179,937.
8 a Gross income from fundraising events (not including \$ 2,376,325. of contributions reported on line 1c). See Part IV, line 18		a		476,887.			
b Less: direct expenses		b		476,887.			
c Net income or (loss) from fundraising events				0.			
9 a Gross income from gaming activities. See Part IV, line 19		a					
b Less: direct expenses		b					
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	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a OTHER REVENUE		900099	366,362.			366,362.	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			366,362.				
12 Total revenue. See instructions.			62,476,395.	120,419.	0.	790,047.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	45,054,250.	45,054,250.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	409,529.	409,529.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,698,266.	321,623.	841,823.	534,820.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,569,388.	2,209,165.	3,973,382.	1,386,841.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	150,703.	45,061.	79,755.	25,887.
9 Other employee benefits	1,389,554.	418,149.	717,711.	253,694.
10 Payroll taxes	750,393.	217,735.	387,648.	145,010.
11 Fees for services (non-employees):				
a Management				
b Legal	14,504.		14,504.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	206,000.			206,000.
f Investment management fees	75,507.		75,507.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,619,102.	346,349.	1,067,551.	205,202.
12 Advertising and promotion	49,371.	4,605.	25,700.	19,066.
13 Office expenses	489,423.	73,883.	161,540.	254,000.
14 Information technology				
15 Royalties				
16 Occupancy	1,660,710.	509,350.	814,565.	336,795.
17 Travel	79,635.	34,684.	21,220.	23,731.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	263,997.	86,323.	108,580.	69,094.
20 Interest	637,146.	195,986.	311,571.	129,589.
21 Payments to affiliates	450,677.	113,443.	337,234.	
22 Depreciation, depletion, and amortization	549,686.	186,114.	257,540.	106,032.
23 Insurance	206,057.	54,702.	114,899.	36,456.
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	533,861.	12,811.	301,604.	219,446.
b EQUIP. RENTALS & EXP.	315,872.	26,499.	262,794.	26,579.
c DUES & SUBSCRIPTIONS	103,852.	16,620.	44,470.	42,762.
d TELEPHONE	43,062.	18,605.	15,895.	8,562.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	64,320,545.	50,355,486.	9,935,493.	4,029,566.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	954,091.	1	1,556,050.
	2 Savings and temporary cash investments	3,921,884.	2	4,816,616.
	3 Pledges and grants receivable, net	10,321,522.	3	11,312,468.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	981,900.	9	905,808.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,948,521.		
	b Less: accumulated depreciation	10b 1,806,499.		
	11 Investments - publicly traded securities	9,334,771.	10c	9,142,022.
	12 Investments - other securities. See Part IV, line 11	6,522,668.	11	4,867,358.
	13 Investments - program-related. See Part IV, line 11	4,200,888.	12	2,769,168.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	455,309.	14	506,500.
16 Total assets. Add lines 1 through 15 (must equal line 34)	36,693,033.	15	35,875,990.	
Liabilities	17 Accounts payable and accrued expenses	3,262,529.	16	3,631,739.
	18 Grants payable	7,695,730.	17	8,565,734.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties	10,587,750.	23	10,656,876.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,056,306.	24	3,402,507.
	26 Total liabilities. Add lines 17 through 25	27,602,315.	25	26,256,856.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		26	
	27 Unrestricted net assets	2,080,265.	27	503,527.
	28 Temporarily restricted net assets	4,683,510.	28	6,737,473.
	29 Permanently restricted net assets	2,326,943.	29	2,378,134.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	9,090,718.	33	9,619,134.
	34 Total liabilities and net assets/fund balances	36,693,033.	34	35,875,990.

Form 990 (2016)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	62,476,395.
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,320,545.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,844,150.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,090,718.
5	Net unrealized gains (losses) on investments	5	482,548.
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	1,890,018.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,619,134.

Part XII Financial Statements and ReportingCheck 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	X

Form 990 (2016)

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

2016

Open to Public
Inspection

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	67043537.	57980327.	56280856.	61875439.	61565929.	304746088
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	67043537.	57980327.	56280856.	61875439.	61565929.	304746088
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						304746088

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	67043537.	57980327.	56280856.	61875439.	61565929.	304746088
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	185,765.	192,129.	271,074.	267,684.	243,748.	1160400.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	34,021.	33,548.		67,649.	366,362.	501,580.
11 Total support. Add lines 7 through 10						306408068
12 Gross receipts from related activities, etc. (see instructions)					12	1,067,992.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.46 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.58 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

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

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

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

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2016

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions		
7	Total annual distributions. Add lines 1 through 6		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions		
9	Distributable amount for 2016 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Supplemental Information.

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

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

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

OMB No. 1545-0047

2016

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization	Employer identification number
UNITED WAY OF NEW YORK CITY	** - ***7681

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW YORK CITY DEPARTMENT OF EDUCATION 52 CHAMBERS STREET NEW YORK, NY 10007	\$ 17,889,446.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NEW YORK CITY DEPARTMENT OF HEALTH HUNGER PREV. & NUTRITION 150 BROADWAY, 6TH FLOOR ALBANY, NY 12204	\$ 6,833,454.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	HELMSLEY CHARITABLE TRUST 230 PARK AVENUE, STE 659 NEW YORK, NY 10169	\$ 3,350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

-*7681

Part II

[illegible]

Name of organization	Employer identification number
UNITED WAY OF NEW YORK CITY	** - ***7681

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

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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

2016

**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) organizations: Complete Part III.

Name of organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

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

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

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) 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-.

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

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

- A** Check ☐ 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).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		101,250.													
c Total lobbying expenditures (add lines 1a and 1b)		101,250.													
d Other exempt purpose expenditures		64,219,295.													
e Total exempt purpose expenditures (add lines 1c and 1d)		64,320,545.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

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

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(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	265.	104,077.	88,044.	101,250.	293,636.
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		60,468.			60,468.

Schedule C (Form 990 or 990-EZ) 2016

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.irs.gov/form990.**

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1	1
2 Aggregate value of contributions to (during year)	0.	1,080,000.
3 Aggregate value of grants from (during year)	9,000.	1,378,371.
4 Aggregate value at end of year	917.	1,393,471.

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,326,943.	3,326,004.	3,256,414.	3,222,866.	3,616,285.
b Contributions			94,590.		450,000.
c Net investment earnings, gains, and losses	51,191.	-999,061.	-25,000.	33,548.	34,021.
d Grants or scholarships					
e Other expenditures for facilities and programs					877,440.
f Administrative expenses					
g End of year balance	2,378,134.	2,326,943.	3,326,004.	3,256,414.	3,222,866.

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

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☒ 100.00 %
 c Temporarily restricted endowment ☐ %

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

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

- (i) unrelated organizations ☒
 (ii) related organizations ☒

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		10,168,898.	1,547,249.	8,621,649.
d Equipment		779,623.	259,250.	520,373.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,142,022.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CASH AND MONEY MARKET		
(B) FUNDS	2,769,168.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	2,769,168.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) CAMPAIGN DONOR DESIGNATIONS		
(3) PAYABLE	91,017.	
(4) PENSION AND POSTRETIREMENT		
(5) OBLIGATION	3,311,490.	
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	3,402,507.	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	46,780,140.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	482,548.
b	Donated services and use of facilities	2b	43,245.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-51,191.
e	Add lines 2a through 2d	2e	474,602.
3	Subtract line 2e from line 1	3	46,305,538.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	75,507.
b	Other (Describe in Part XIII.)	4b	16,095,350.
c	Add lines 4a and 4b	4c	16,170,857.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	62,476,395.

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

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

1	Total expenses and losses per audited financial statements	1	51,419,944.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	43,245.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	2,532,919.
e	Add lines 2a through 2d	2e	2,576,164.
3	Subtract line 2e from line 1	3	48,843,780.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	75,507.
b	Other (Describe in Part XIII.)	4b	15,401,258.
c	Add lines 4a and 4b	4c	15,476,765.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	64,320,545.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENT FUNDS ARE PRIMARILY USED IN PERPETUITY TO
 PROVIDE A PERMANENT SOURCE OF INCOME.

PART X, LINE 2:

UWNYC BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2017 AND
 2016 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC
 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND
 CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN PERPETUAL TRUST

-51,191.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RESERVE FOR UNCOLLECTABLE RECEIVABLES FOR CAMPAIGN	694,092.
DONOR DESIGNATIONS	15,401,258.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	16,095,350.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PENSION RELATED CHANGES	2,532,919.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATIONS	15,401,258.
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Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GRIDIRON GALA (event type)	WLC LUNCHEON (event type)	NONE (total number)	
Revenue	1 Gross receipts	1,885,990.	967,222.		2,853,212.
	2 Less: Contributions	1,503,124.	873,201.		2,376,325.
	3 Gross income (line 1 minus line 2)	382,866.	94,021.		476,887.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	382,866.	94,021.		476,887.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				476,887.
11 Net income summary. Subtract line 10 from line 3, column (d)				0.	

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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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? ☐ Yes ☐ No**b** If "No," explain: _____**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No**b** If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming 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 If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16** Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) 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 PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SMK EVENT SOLUTIONS, LLC

(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, PELHAM, NY 10803

(I) NAME OF FUNDRAISER: THE PROMETHEUS EXCHANGE LLC

Part IV Supplemental Information *(continued)*

(I) ADDRESS OF FUNDRAISER:

170 EAST 88TH STREET, SUITE 6H, NEW YORK, NY 10128

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

****-***7681**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
DRISCOLL FOODS 174 DELAWANNA CLIFTON, NJ 07014	** - ***2240		4,236,766.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
THE DOOR - A CENTER OF ALTERNATIVES - 121 AVENUE OF THE AMERICAS - NEW YORK, NY 10013	** - ***7348	501(C)3	1,505,028.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVE/UFT - 52 BROADWAY - NEW YORK, NY 10004	** - ***7433	501(C)3	1,420,605.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
EAST SIDE HOUSE INC. 337 ALEXANDER AVE. BRONX, NY 10454	** - ***3989	501(C)3	1,275,565.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
SPORTS & ARTS IN SCHOOLS FOUNDATION - 58-12 QUEENS BLVD - WOODSIDE, NY 11377	** - ***2635	501(C)3	1,138,012.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
PARTNERSHIP WITH CHILDREN, INC. 299 BROADWAY, SUITE NEW YORK, NY 10007	** - ***6751	501(C)3	1,073,652.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY

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

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

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

Schedule I (Form 990) (2016)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
EAST SIDE HOUSE INC. 337 ALEXANDER AVE. BRONX, NY 10454	** - ***3989	501(C)3	1,011,157.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE, 9TH FL NEW YORK, NY 10001	** - ***8710	501(C)3	946,345.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
MAKE THE ROAD NY 301 GROVE STEET BROOKLYN, NY 11237	** - ***4389	501(C)3	846,026.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
GLOBAL KIDS, INC. 137 EAST 25TH STREET, 2ND FLOOR NEW YORK, NY 10010	** - ***9485	501(C)3	832,081.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
PATHWAYS TO LEADERSHIP 598 BROADWAY NEW YORK, NY 10012	** - ***6413	501(C)3	772,788.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT - 130 STUYVESANT PLACE - STATEN ISLAND, NY 10301	** - ***5239	501(C)3	638,913.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
BRONXWORKS 60 EAST TREMONT AVE. BRONX, NY 10453	** - ***4484	501(C)3	600,356.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
FAMILY HEALTH INTERNATIONAL 71 5TH AVENUE NEW YORK, NY 10003	** - ***3005	501(C)3	588,967.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
ATAPE GROUP, LLC 555 KAPPOCK STREET BRONX, NY 10463	** - ***9670		563,694.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,

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

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URBAN ARTS PARTNERSHIP 414 BROADWAY FL NEW YORK, NY 10013	** - ***4734	501(C)3	494,709.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
CENTER FOR SUPPORTIVE SCHOOLS 461 GRAND STREET BROOKLYN, NY 11211	** - ***2532	501(C)3	442,149.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NY - 1011 FIRST AVENUE - NEW YORK, NY 10022	** - ***2184	501(C)3	440,686.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
SCAN-NEW YORK 245 E 87TH ST STE 11E NEW YORK, NY 10128	** - ***2963	501(C)3	418,578.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
GRAND STREET SETTLEMENT 80 PITT STREET NEW YORK, NY 10002	** - ***2230	501(C)3	412,734.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
AFTER SCHOOL ALL STARS OF NYC 8000 UTOPIA PKWY JAMAICA, NY 11439	** - ***6766	501(C)3	406,060.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
EL-PUENTE 211 SOUTH 4TH STREET BROOKLYN, NY 11211	** - ***4265	501(C)3	395,078.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
ST. NICKS ALLIANCE 2 KINGS LAND AVENUE, 2ND FLOOR BROOKLYN, NY 11211	** - ***2170	501(C)3	369,747.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
TEACHER COLLEGE, COLUMBIA UNIVERSITY - 525 W 120TH ST - NEW YORK, NY 10027	** - ***4202	501(C)3	365,948.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY

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HUNGER FREE AMERICA 16 BEAVER STREET, 3RD FLOOR NEW YORK, NY 10004	** - ***1350	501(C)3	357,911.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
PHIPPS COMMUNITY DEVELOPMENT CORPORATION - 902 BROADWAY, 13TH FLOOR - NEW YORK, NY 10010	** - ***7665	501(C)3	354,279.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
ROAD TO SUCCESS 307 W 38TH ST STE1101 NEW YORK, NY 10018	** - ***6096	501(C)3	302,400.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
THE CHILDREN'S AID SOCIETY 105 E. 22ND STREET NEW YORK, NY 10010	** - ***2191	501(C)3	291,049.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
HENRY STREET SETTLEMENT 265 HENRY STREET NEW YORK, NY 10002	** - ***2242	501(C)3	287,488.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION - 625 JAMAICA AVENUE - BROOKLYN, NY 11208	** - ***3663	501(C)3	277,500.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
SCO FAMILY OF SERVICES 1 ALEXANDER PLACE GLEN COVE, NY 11542	** - ***7066	501(C)3	271,255.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
CAMBA 1720 CHURCH AVENUE, 2ND FL BROOKLYN, NY 11226	** - ***0339	501(C)3	271,014.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
FIFTH AVENUE COMMITTEE 294 SMITH STREET BROOKLYN, NY 11231	** - ***5743	501(C)3	262,500.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15

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NEW SETTLEMENT APARTMENTS 1512 TOWNSEND AVENUE BRONX, NY 10452	** - ***9016	501(C)3	262,500.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
ST. NICKS ALLIANCE 2 KINGSLAND AVENUE, 2ND FLOOR BROOKLYN, NY 11211	** - ***2170	501(C)3	262,500.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
RISEBORO COMMUNITY PARTNERSHIP (FORMERLY RIDGEWOOD BUSHWICK SENIOR CITIZENS - 217 WYCKOFF AVENUE - BROOKLYN, NY 11237	** - ***3853	501(C)3	214,913.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
FOOD BANK FOR NEW YORK CITY 39 BROADWAY, 10TH FLOOR NEW YORK, NY 10006	** - ***6532	501(C)3	194,389.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
CITY HARVEST 6 E 32ND ST NEW YORK, NY 10016	** - ***0676	501(C)3	177,576.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
CHINESE-AMERICAN PLANNING COUNCIL, INC. - 150 ELIZABETH ST - NEW YORK, NY 10012	** - ***2692	501(C)3	150,636.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
YMCA OF GREATER NEW YORK 5 WEST 63RD ST, 6TH FL NEW YORK, NY 10023	** - ***4228	501(C)3	149,400.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
BRONXWORKS 60 EAST TREMONT AVE. BRONX, NY 10453	** - ***4484	501(C)3	147,073.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
BALTER SALES COMPANY, INC. 209 BOWERY NEW YORK, NY 10002	** - ***1598		114,093.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

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COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC - 56 BAY STREET - STATEN ISLAND, NY 10301	** - ***6132	501(C)3	108,477.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
THE CHILDREN'S VILLAGE ONE ECHO HILLS DOBBS FERRY, NY 10522	** - ***9945	501(C)3	94,800.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
PART OF THE SOLUTION 2759 WEBSTER AVE BRONX, NY 10458	** - ***5071	501(C)3	84,986.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
BENZ'S FOOD PRODUCTS, INCORPORATED 332 ALBANY AVENUE BROOKLYN, NY 11213	** - ***1450		84,199.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CURTIS WARD REFRIGERATION CORP 217-44A 98TH AVENUE QUEENS VILLAGE, NY 11429	** - ***8460		82,635.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BETH-HARK CHRISTIAN COUNSELING CENTER - 2-26 EAST 120TH STREET - NEW YORK, NY 10035	** - ***6481	501(C)3	81,215.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
READ ALLIANCE 80 MAIDEN LANE, 11TH FLOOR NEW YORK, NY 10038	** - ***1062	501(C)3	78,741.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
CRANBERRY HALL FARM 32 BROWNSMILLS COOKSTOWN RD,, PO 27 COOKSTOWN, NJ 08511	** - ***7065		76,128.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GENERATION READY INC. 352 SEVENTH AVE NEW YORK, NY 10001	** - ***2096	501(C)3	75,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,

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WINDFLOWER FARM LLC 585 MEETING HOUSE ROAD VALLEY FALLS, NY 12185	** - ***6178		74,448.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BALTER SALES COMPANY, INC. 209 BOWERY NEW YORK, NY 10002	** - ***1598		73,005.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
NEW COVENANT COMMUNITY DEVELOPMENT CORP. - 1175 BOSTON ROAD - BRONX, NY 10456	** - ***7577	501(C)3	68,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
MDRC 16 E. 34TH STREET NEW YORK, NY 10016	** - ***9473	501(C)3	64,646.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
CAUSE EFFECTIVE 505 EIGHTH AVENUE, SUITE 12120 NEW YORK, NY 10018	** - ***3978	501(C)3	60,000.	0.			BOARDSERVENYC - BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC
GROWN NYC 51 CHAMBERS STREET, RM NEW YORK, NY 10007	** - ***5465	501(C)3	60,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
THE FARM AT MILLER'S CROSSING 81 ROXBURY ROAD HUDSON, NY 12534	** - ***1452		59,400.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
WHISTLE DOWN FARM 20 SCHOOL TEACHER ROAD HUDSON, NY 12534	** - ***6339		53,280.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
HEARTY ROOTS FARM P.O BOX 277 TIVOLI, NY 12583	** - ***5491		51,840.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

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BRONX BETHANY COMMUNITY CORP. 964 EAST 227TH ST BRONX, NY 10466	** - ***3711	501(C)3	50,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
ELMCOR YOUTH & ADULT ACTIVITIES, INC. - 33-16 108TH STREET - CORONA, NY 11368	** - ***4539	501(C)3	50,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
WOMEN'S CENTER FOR EDUCATION AND CAREER ADVANCEMENT - 11 BROADWAY, STE 450 - NEW YORK, NY 10004	** - ***5476	501(C)3	50,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
CENTER FOR NYC AFFAIRS/MILANO THE NEW SCHOOL - 66 WEST 12TH STREET - NEW YORK, NY 10111	** - ***7197	501(C)3	49,950.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
INWOOD HOUSE 320 E. 82ND STREET NEW YORK, NY 10028	** - ***2254	501(C)3	47,400.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
HOLDING HANDS MINISTRIES 6324 7TH AVE BROOKLYN, NY 11220	** - ***9566	501(C)3	44,415.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
CDW DIRECT, LLC 300 N MILWAUKEE AVE. VERNON HILLS, IL 60061	** - ***0735		40,133.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
GOLDEN EARTHWORM ORGANIC FARM, LLC 652 PECONIC BAY BLVD., P.O BOX 871 JAMESPORT, NY 11947	** - ***0224		39,600.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
MCCLANAHAN ASSOCIATES, INC. 100 W. MAIN STREET, SUITE 208 LANSDALE, PA 19446	** - ***3225		38,530.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,

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PUBLIC WORKS PARTNERS LLC 220 FIFTH AVE, 2ND FL NEW YORK, NY 10001	** - ***7604		38,000.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
STONELEDGE FARM LLC 359 ROSS RULAND RD SOUTH CAIRO, NY 12482	** - ***1185		35,640.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
COMMUNITY COUNSELING AND MEDIATION-GEORGIA'S PLACE - 1 HOYT STREET, 7TH FL - BROOKLYN, NY 11201	** - ***5243	501(C)3	30,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NFOCUS SOLUTIONS (SWMG PRODUCTIONS, INC) - 6225 NORTH 24TH STREET, GL 100 - PHOENIX, AZ 85016	** - ***8234		29,553.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
RED APPLE FRUIT AND VEGETABLE 455 ALBANY AVENUE BROOKLYN, NY 11213	** - ***7071		29,121.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
HUMAN SERVICES COUNCIL OF NEW YORK CITY, INC - 130 EAST 59TH STREET - NEW YORK, NY 10022	** - ***0059	501(C)3	25,000.	0.			BOARDSERVENYC - BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC
SOUTH ASIAN COUNCIL OF SOCIAL SERVICES - 143-06 45TH AVENUE - FLUSHING, NY 11355	** - ***2920	501(C)3	25,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
TECHBRIDGE 100 PEACHTREE ST. NW STE 2090 ATLANTA, GA 30303	** - ***1971		24,750.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
NAZARETH HOUSING, INC. 519 EAST 11TH STREET NEW YORK, NY 10009	** - ***6952	501(C)3	24,600.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND

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COUNCIL OF PEOPLES ORGANIZATION 1081 CONEY ISLAND AVE BROOKLYN, NY 11230	** - ***6891	501(C)3	23,017.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
SHABBOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN, NY 11225	** - ***0901		21,622.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
RUSSO'S ROOTS LLC 277 N. SOCIETY RD CANTEBURY, CT 06331	** - ***6381		21,600.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CENTRAL QUEENS YM & YWHA 67-09 108TH STREET FOREST HILLS, NY 11375	** - ***3509	501(C)3	20,198.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
HIGHROAD PRESS LLC 220 ANDERSON AVENUE MOONACHIE, NJ 07074	** - ***9991		19,879.	0.			FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
BLACK FORUM OF CO-OP CITY 177 DREISER LOOP, ROOM 20 BRONX, NY 10475	** - ***2466	501(C)3	17,150.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
HOLY INNOCENTS CHURCH 279 EAST 17TH ST. BROOKLYN, NY 11226	** - ***6825	501(C)3	17,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
CO-OP CITY SDA CHURCH COMMUNITY SERVICES - 1010 BAYCHESTER AVENUE - BRONX, NY 10475	** - ***3036	501(C)3	16,794.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
I.M.C. NARROW DOOR/LA PUERTA ESTRECHA - 161 SHERMAN AVE - NEW YORK, NY 10034	** - ***6779	501(C)3	16,600.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND

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ST. LUKE'S SENIOR COMMUNITY PROGRAM - 777 E. 222ND STREET - BRONX, NY 10467	** - ***3342	501(C)3	16,500.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
MICROSOFT P.O. BOX 842103 DALLAS, TX 75284	** - ***4442		13,870.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
VICTORY TABERNACLE 1980 UTICA AVENUE BROOKLYN, NY 11234	** - ***2726	501(C)3	13,750.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
HUMAN ELEMENT, LLC 1625 WYATTS RIDGE CROWNSVILLE, MD 21032	** - ***3639	501(C)3	12,545.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
TRINITY SERVICES & FOOD FOR THE HOMELESS, INC - 602 E. 9TH STREET - NEW YORK, NY 10009	** - ***1340	501(C)3	12,500.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
THE CHILDREN'S HEALTH FUND 215 W. 125TH STREET, STE 301 NEW YORK, NY 10027	** - ***8427	501(C)3	12,500.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
HOLY SPIRIT CHURCH 1712 45TH STREET BROOKLYN, NY 11204	** - ***2407	501(C)3	11,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
AGRI PROCESSORS, LLC 5600 1ST AVENUE BROOKLYN, NY 11220	** - ***5839		10,688.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BOWERY MISSION/CHRISTIAN HERALD ASSOCIATION - 227 BOWERY - NEW YORK, NY 10002	** - ***7086	501(C)3	10,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

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MAKE THE ROAD NY 301 GROVE STEET NEW YORK, NY 11237	** - ***4389	501(C)3	10,170.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
SHILOH TEMPLE APOSTOLIC FAITH INC 719 EAST 223 STREET BRONX, NY 10466	** - ***5161	501(C)3	10,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
HOUSING COURTS ANSWERS 125 MAIDEN LANE, RM 318 NEW YORK, NY 10013	** - ***7188	501(C)3	10,000.	0.			HOUSING COURT ANSWERS CRISIS SUPPORTS - THIS SERVICE IS A RENTAL ARREARS, UTILITY AND
CODERO HOSTING 8735 ROSEHILL ROAD LENEXA, KS 66215	** - ***4713		8,328.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CABRIN IMMIGRATION SERVICES 139 HENRY ST. NEW YORK, NY 10002	** - ***8656	501(C)3	8,000.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
ARIVA, INC 69 EAST 167TH STREET, 2ND FLOOR BRONX, NY 10452	** - ***8598		7,500.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
LIFT-NY 349 E. 149TH STREET, #500 BRONX, NY 10451	** - ***8409	501(C)3	7,500.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
MINISTRY TOOLS/PROJECT HOPE CHARITIES, INC - 256-21 UNION TURNPIKE - GLEN OAKS, NY 11004	** - ***9043	501(C)3	7,250.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ONEG SHABBOS 1603 41ST STREET BROOKLYN, NY 11218	** - ***0927	501(C)3	7,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
TRIUMPHANT FULL GOSPEL ASSEMBLY, INC. - 892 RUTLAND ROAD - BROOKLYN, NY 11203	** - ***2268	501(C)3	6,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
VINEYARD INTERNATIONAL CHRISTIAN MINISTRIES - 1140 TELLER AVE - BRONX, NY 10456	** - ***4172	501(C)3	6,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CITY OF FAITH CHURCH OF GOD 3453 WHITE PLAINS ROAD BRONX, NY 10467	** - ***9503	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
EMMAUS S.D.A CHURCH 1144 FLATBUSH AVENUE BROOKLYN, NY 11226	** - ***8673	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
FAMILY WORSHIP CENTER CHURCH OF GOD OF PROPHECY - 701 E 212TH ST. - BRONX, NY 10466	** - ***1955	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
OUR LADY OF REFUGE 2020 FOSTER AVENUE BROOKLYN, NY 11210	** - ***3446	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
SALVATION ARMY BROWNSVILLE CORPS 2664 ATLANTIC AVE BROOKLYN, NY 11207	** - ***2351	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
SOLID ROCK BAPTIST CHURCH 120 TOMPKINS AVENUE BROOKLYN, NY 11206	** - ***9373	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
STREET LIFE MINISTRIES 15411 ASH AVE FLUSHING, NY 11355	** - ***8849	501(C)3	6,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
SALVATION ARMY - QUEENS TEMPLE CORPS - 86-07 35TH AVE. - JACKSON HEIGHTS, NY 11372	** - ***2351	501(C)3	5,800.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BAY RIDGE CENTER 4110 OVERTON AVE BROOKLYN, NY 11209	** - ***9714	501(C)3	5,750.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ALL PEOPLE'S CHURCH OF APOSTOLIC 182 TOMPKINS AVE BROOKLYN, NY 11206	** - ***5069	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ATONEMENT LUTHERAN CHURCH 30-61 87TH STREET JACKSON HEIGHTS, NY 11369	** - ***2808	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BEDSTUY CAMPAIGN AGAINST HUNGER. 539 EASTERN PARKWAY BROOKLYN, NY 11216	** - ***4854	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BETHANY UNITED METHODIST CHURCH 1208 ST. JOHNS PLACE BROOKLYN, NY 11213	** - ***8705	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CROSSROADS COMMUNITY SERVICES INC 325 PARK AVENUE NEW YORK, NY 10022	** - ***2651	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
FIRST PRESBYTERIAN CHURCH IN JAMAICA - 89-60 164TH STREET - JAMAICA, NY 11432	** - ***6813	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NATIONAL COUNCIL OF JEWISH WOMEN-NY SECTION - 241 WEST 72ND STREET - NEW YORK, NY 10023	** - ***4132	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
NORTHEAST BROOKLYN HOUSING DEVELOPMENT CORP - 132 RALPH AVENUE - BROOKLYN, NY 11233	** - ***7223	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
VAAD HAKOL CROWN HEIGHTS 1276 PRESIDENT STREET BROOKLYN, NY 11213	** - ***3618	501(C)3	5,500.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
KENOVER MARKETING CORPORATION 9 - 29TH STREET BROOKLYN, NY 11232	** - ***6036		5,427.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BROADWAY COMMUNITY INC, 601 WEST 114TH STREET NEW YORK, NY 10025	** - ***2817	501(C)3	5,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BROOKLYN RESCUE MISSION 255 BAINBRIDGE STREET BROOKLYN, NY 11233	** - ***9367	501(C)3	5,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GRAND CONCOURSE COMMUNITY SERVICE 1275 GRAND CONCOUSE BRONX, NY 10452	** - ***6763	501(C)3	5,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
HOOR CHILDREN 36-11A 12TH STREET LIC, NY 11106	** - ***7412	501(C)3	5,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NEW HOPE PENTECOSTAL CHURCH OF JESUS CHRIST, INC - 1838 PARK PLACE - BROOKLYN, NY 11233	** - ***8187	501(C)3	5,300.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CURTIS WARD REFRIGERATION CORP 217-44A 98TH AVENUE QUEENS VILLAGE, NY 11429	** - ***8460		5,240.	0.			FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
ELOHIM COMMUNITY DEVELOPMENT AND 8747 111TH ST RICHMOND HILL, NY 11418	** - ***3039	501(C)3	5,208.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ST. ANN'S CHURCH 854 MIDLAND AVE YONKER, NY 10704	** - ***3287	501(C)3	5,100.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BNAI RAPHAEL CHESED ORGANIZATION 1741 MCDONALD AVENUE BROOKLYN, NY 11230	** - ***4890	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
BRONX BETHANY COMMUNITY CORP. 964 EAST 227TH ST BRONX, NY 10466	** - ***3711	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CHRISTIAN FELLOWSHIP SDA CHURCH 777-779 SCHENECTADY AVE BROOKLYN, NY 11203	** - ***5286	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CHURCH OF GOD FEEDING THE HUNGRY 836 CLASSON AVENUE BROOKLYN, NY 11238	** - ***8272	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
CHURCH OF THE LIVING GOD 932 CARROLL ST APT 6D BROOKLYN, NY 11225	** - ***7347	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
COMMUNITY IMPACT 105 EARL HALL COLUMBIA UNIVERSITY NEW YORK, NY 10027	** - ***6904	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
EVANGELICAL CHURCH CHRIST IS THE LIGHT - 89-16 84TH AVENUE - ELMHURST, NY 11373	** - ***8293	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
EVERY DAY IS A MIRACLE, INC 477 BROOK AVE BRONX, NY 10455	** - ***2907	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
FRATERNITE NOTRE DAME, INC 502 N CENTRAL AVENUE CHICAGO, IL 60644	** - ***0714	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GETHSEMANE BAPTIST CHURCH 771 FAIRMOUNT PLACE BRONX, NY 10460	** - ***0224	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GRAND CENTRAL NEIGHBORHOOD 120 EAST 32ND STREET NEW YORK, NY 10016	** - ***4255	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GREENPOINT REFORMED CHURCH FOOD PANTRY - 136 MILTON ST. - BROOKLYN, NY 11222	** - ***0335	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
HOUSE OF COMPLETION 112-07 GUY R. BREWER BLVD JAMAICA, NY 11433	** - ***6036	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
LEVITICUS CHURCH 132 EAST 24TH STREET NEW YORK, NY 10010	** - ***8942	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
LITTLE SISTERS OF THE ASSUMPTION FAMILY HEALTH SERVICE, INC - 333 EAST 115TH STREET - NEW YORK, NY 10029	** - ***7881	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
MANNA OF LIFE MINISTRIES, INC 578 E 166TH ST BRONX, NY 10456	** - ***8422	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
MT. PARAN COMMUNITY DEVELOPMENT CORP - 1665 BROADWAY - NY, NY 11207	** - ***9613	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NEIGHBORS TOGETHER 2094 FULTON STREET BROOKLYN, NY 11233	** - ***2109	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NEW YORK CITY RESCUE MISSION 90 LAFAYETTE STREET NEW YORK, NY 10013	** - ***6794	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
NORTHEASTERN CONFERENCE ADVENTIST COMMUNITY SVCS CTR - 99-13 NORTHERN BOULEVARD - CORONA, NY 11368	** - ***2575	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
OVERCOMING-LOVE MINISTRIES 7814 ROCKAWAY BLVD WOODHAVEN, NY 11421	** - ***4575		5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ST. EDMUNDS YOUTH PROGRAMS, INC. 1905 MORRIS AVENUE BRONX, NY 10453	** - ***6007	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ST. LUKE BAPTIST CHURCH 133-28 232ND STREET LAURELTON, NY 11413	** - ***2912	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
ST. MICHAEL'S CHURCH 225 WEST 99TH ST. NEW YORK, NY 10025	** - ***6684	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
TEMPLE SHAAREY TEFILA 250 EAST 79 STREET NEW YORK, NY 10075	** - ***6613	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
UNIVERSITY COMMUNITY SOCIAL SERVICES, INC - 137 EAST 2ND ST. - NEW YORK, NY 10009	** - ***3507	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
WAY OUT CHURCH MINISTRIES 520 E. 148TH STREET BRONX, NY 10455	** - ***3909	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
WE CARE COMMUNITY OUTREACH 1624 EAST 172ND STREET BRONX, NY 10472	** - ***2425	501(C)3	5,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
TECHBRIDGE 100 PEACHTREE ST. NW STE 2090 ATLANTA, GA 30303	** - ***1971	501(C)3	12,000.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
GONZALEZ FARM 12 LINCOLN STREET MIDDLETOWN, NY 10940	** - ***8300		11,880.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
UNITED COACH LINE INC. 3120 ARTHUR KILL ROAD STATEN ISLAND, NY 10309	** - ***7571		5,795.	0.			HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE
DELOITTE CONSULTING LLP 4022 SELLS DRIVE HERMITAGE, TN 37076	** - ***4513		6,096.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
BOARDSERVE NYC	1	13,500.	0.		
CHANGE CAPITAL FUND	4	210,325.	0.		
FOOD ASSISTANCE COLLABORATIVE	4	185,704.	0.		

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

PART I, LINE 2:

AS PART OF THE PROCESS OF MONITORING THE COMMUNITY BASED ORGANIZATIONS THAT
UWNYC FUNDS, UWNYC REQUIRES A DETAILED BUDGET TO IDENTIFY HOW THE AGENCY
INTENDS TO SPEND THE CONTRACT AWARD AND AN EXPENDITURE REPORT TO
SUBSTANTIATE THE AMOUNT REQUESTED FOR PAYMENT. UWNYC ALSO REQUIRES AND
REVIEW AGENCIES' PROGRAMMATIC DATA AND ACCOMPLISHMENTS. FINALLY, UWNYC
CONDUCTS PROGRAMMATIC REVIEWS AT THE PROGRAM SITES AND PROVIDE FEEDBACK.

PART II, LINE 1, COLUMN (H):

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DRISCOLL FOODS

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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 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:

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

Part IV Supplemental Information

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: 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: 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

Part IV Supplemental Information

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: 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: 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: 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

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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: 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 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

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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 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: 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: ATAPE GROUP, LLC

(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: 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: 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:

CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NY

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

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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: 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.

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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: 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 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

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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: HUNGER FREE AMERICA

(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:

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

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ATTENDANCE IMPROVEMENT SERVICES.

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: 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: HENRY 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.

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NAME OF ORGANIZATION OR GOVERNMENT:

CYPRESS HILLS LOCAL DEVELOPMENT 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 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: 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: 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

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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: FIFTH AVENUE COMMITTEE

(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: 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 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

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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 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:

RISEBORO COMMUNITY PARTNERSHIP (FORMERLY RIDGEWOOD BUSHWICK SENIOR CITIZENS

(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 CITY

(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.

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NAME OF ORGANIZATION OR GOVERNMENT: CITY HARVEST

(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:

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: YMCA 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: 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

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BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

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: THE CHILDREN'S VILLAGE

(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: PART OF THE SOLUTION

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(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: BENZ'S FOOD PRODUCTS, INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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 CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: BETH-HARK CHRISTIAN COUNSELING CENTER

(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

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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: 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: CRANBERRY HALL FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: GENERATION READY 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: WINDFLOWER FARM LLC

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(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: 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:

NEW COVENANT COMMUNITY DEVELOPMENT CORP.

(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: MDRC

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC

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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: CAUSE EFFECTIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: BOARDSEVENYC - 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: GROWNYC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

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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: WHISTLE DOWN FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: BRONX BETHANY COMMUNITY CORP.

(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

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NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES.

NAME OF ORGANIZATION OR GOVERNMENT:

ELMCOR YOUTH & ADULT ACTIVITIES, INC.

(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:

WOMEN'S CENTER FOR EDUCATION AND CAREER ADVANCEMENT

(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:

CENTER FOR NYC AFFAIRS/MILANO THE NEW SCHOOL

(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: 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: HOLDING HANDS MINISTRIES

(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: CDW DIRECT, LLC

(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: GOLDEN EARTHWORM ORGANIC FARM, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: MCCLANAHAN ASSOCIATES, 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: PUBLIC WORKS PARTNERS LLC

(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: STONELEDGE FARM LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

COMMUNITY COUNSELING AND MEDIATION-GEORGIA'S PLACE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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:

NFOCUS SOLUTIONS (SWMG PRODUCTIONS, 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: RED APPLE FRUIT AND VEGETABLE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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

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WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT:

HUMAN SERVICES COUNCIL OF NEW YORK CITY, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: BOARDSEVENYC - 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:

SOUTH ASIAN COUNCIL OF SOCIAL SERVICES

(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: TECHBRIDGE

(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: NAZARETH HOUSING, INC.

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(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: COUNCIL OF PEOPLES ORGANIZATION

(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: SHABBOS FISH MARKET

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: RUSSO'S ROOTS LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: CENTRAL QUEENS YM & YWHA

(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: HIGHROAD PRESS LLC

(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: BLACK FORUM OF CO-OP CITY

(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: HOLY INNOCENTS CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD ASSISTANCE COLLABORATIVE - THE

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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:

CO-OP CITY SDA CHURCH COMMUNITY SERVICES

(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: I.M.C. NARROW DOOR/LA PUERTA ESTRECHA

(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: ST. LUKE'S SENIOR COMMUNITY PROGRAM

(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

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NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES.

NAME OF ORGANIZATION OR GOVERNMENT: MICROSOFT

(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: VICTORY TABERNACLE

(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: HUMAN ELEMENT, LLC

(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:

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TRINITY SERVICES & FOOD FOR THE HOMELESS, INC

(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: THE CHILDREN'S HEALTH 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: HOLY SPIRIT CHURCH

(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, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

BOWERY MISSION/CHRISTIAN HERALD ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: MAKE THE ROAD NY

(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: SHILOH TEMPLE APOSTOLIC FAITH INC

(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

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RESOURCES.

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 BOROUGHES FACING EVICTION DUE TO NONPAYMENT OF RENT, WHO ARE SEEKING RENTAL ASSISTANCE OR WHO HAVE QUESTIONS REGARDING HOUSING COURT.

NAME OF ORGANIZATION OR GOVERNMENT: CODERO HOSTING

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: CABRIN IMMIGRATION SERVICES

(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: ARIVA, INC

(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: LIFT-NY

(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:

MINISTRY TOOLS/PROJECT HOPE CHARITIES, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: ONEG SHABBOS

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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

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WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT:

TRIUMPHANT FULL GOSPEL ASSEMBLY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

VINEYARD INTERNATIONAL CHRISTIAN MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: CITY OF FAITH CHURCH OF GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: EMMAUS S.D.A CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

FAMILY WORSHIP CENTER CHURCH OF GOD OF PROPHECY

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: OUR LADY OF REFUGE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: SALVATION ARMY BROWNSVILLE CORPS

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: SOLID ROCK BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: STREET LIFE MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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

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WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY - QUEENS TEMPLE CORPS

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: BAY RIDGE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: ALL PEOPLE'S CHURCH OF APOSTOLIC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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

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ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: ATONEMENT LUTHERAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: BEDSTUY CAMPAIGN AGAINST HUNGER.

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: BETHANY UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: CROSSROADS COMMUNITY SERVICES INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: FIRST PRESBYTERIAN CHURCH IN JAMAICA

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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:

NATIONAL COUNCIL OF JEWISH WOMEN-NY SECTION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

NORTHEAST BROOKLYN HOUSING DEVELOPMENT CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: VAAD HAKOL CROWN HEIGHTS

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: BROADWAY COMMUNITY INC,

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: BROOKLYN RESCUE MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: GRAND CONCOURSE COMMUNITY SERVICE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: HOUR CHILDREN

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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:

NEW HOPE PENTECOSTAL CHURCH OF JESUS CHRIST, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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 CORP

(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: ELOHIM COMMUNITY DEVELOPMENT AND

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(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: ST. ANN'S CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: BNAI RAPHAEL CHESED ORGANIZATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: BRONX BETHANY COMMUNITY CORP.

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

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ASSISTANCE PROGRAM (HPNAP) - 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: CHRISTIAN FELLOWSHIP SDA CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: CHURCH OF GOD FEEDING THE HUNGRY

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: CHURCH OF THE LIVING GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND

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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: COMMUNITY IMPACT

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

EVANGELICAL CHURCH CHRIST IS THE LIGHT

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: EVERY DAY IS A MIRACLE, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND

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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: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: GETHSEMANE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: GRAND CENTRAL NEIGHBORHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

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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:

GREENPOINT REFORMED CHURCH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: HOUSE OF COMPLETION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: LEVITICUS CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

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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:

LITTLE SISTERS OF THE ASSUMPTION FAMILY HEALTH SERVICE, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: MANNA OF LIFE MINISTRIES, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: MT. PARAN COMMUNITY DEVELOPMENT CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

Part IV Supplemental Information

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: NEIGHBORS TOGETHER

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: NEW YORK CITY RESCUE MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

NORTHEASTERN CONFERENCE ADVENTIST COMMUNITY SVCS CTR

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE

Part IV Supplemental Information

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: OVERCOMING-LOVE MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: ST. EDMUNDS YOUTH PROGRAMS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: ST. LUKE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

Part IV Supplemental Information

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: ST. MICHAEL'S CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: TEMPLE SHAAREY TEFILA

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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:

UNIVERSITY COMMUNITY SOCIAL SERVICES, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION

Part IV Supplemental Information

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: WAY OUT CHURCH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: WE CARE COMMUNITY OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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: TECHBRIDGE

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION

ASSISTANCE PROGRAM (HPNAP) - 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

Part IV Supplemental Information

WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: GONZALEZ FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: UNITED COACH LINE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - 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: DELOITTE CONSULTING LLP

(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.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

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2016

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Part I Questions Regarding Compensation

1a 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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b 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

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 on line 1a?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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 contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on 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:

a The organization?

b Any related organization?

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 nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2016

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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SHEENA WRIGHT PRESIDENT & CEO	(i)	385,871.	0.	1,081.	700.	17,225.	404,877.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOHN A. MCKEGNEY EXEC. VP & CFO (FORMER)	(i)	212,363.	0.	3,396.	6,000.	3,271.	225,030.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SUNITA SUBRAMANIAN GEN. COUNSEL & ASST.	(i)	194,775.	0.	533.	0.	4,631.	199,939.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LESLEIGH IRISH-UNDERWOOD S.V.P. & CHIEF MARKETING OFFICER	(i)	209,450.	0.	1,311.	100.	4,919.	215,780.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) NICOLE GALLANT S.V.P. & CHIEF IMPACT OFF.	(i)	200,973.	0.	585.	120.	3,731.	205,409.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) WALLACE BACHMAN S.V.P. & CHIEF TALENT OFFICER	(i)	192,511.	0.	3,365.	3,900.	13,467.	213,243.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JACQUELINE JENKINS SVP OF STRATEGY MANAGEMENT	(i)	162,623.	0.	390.	300.	13,424.	176,737.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MIRIAM BENITEZ VP OF HUMAN CAPITAL (FORMER)	(i)	148,867.	0.	2,574.	113.	12,115.	163,669.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) PATRICK MA VP OF OPERATIONS (FORMER)	(i)	139,397.	0.	351.	200.	28,440.	168,388.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) VICTOR MILLSAP VP INFORMATION TECHNOLOGY	(i)	142,247.	0.	1,628.	100.	13,266.	157,241.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III	Supplemental Information
-----------------	---------------------------------

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

**SCHEDULE M
(Form 990)**Department of the Treasury
Internal Revenue Service**Noncash Contributions**

OMB No. 1545-0047

2016**Open To Public
Inspection**

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization

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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
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 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SPECIAL EVENT)	X	2	53,000.	FMV
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) (2016)

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY-BASED NON-PROFITS TO TACKLE THE ROOT CAUSES OF POVERTY. WE
DESIGN AND INVEST IN EVIDENCE-BASED INITIATIVES THAT ENSURE LOW-INCOME
NEW YORKERS ARE ABLE TO MEET BASIC NEEDS AND BUILD A BETTER FUTURE. WE
RIGOROUSLY EVALUATE OUR WORK AND USE LESSONS LEARNED TO LEVERAGE A
WORLDWIDE NETWORK OF UNITED WAYS TO INFORM AND ADVANCE PUBLIC POLICIES
THAT PREVENT AND ALLEVIATE POVERTY CITYWIDE. UNITED WAY OF NEW YORK
CITY FOSTERS A MORE ROBUST AND EFFECTIVE NON-PROFIT SECTOR 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 MISSION:

ACCESS TO QUALITY EDUCATION AND THE OPPORTUNITY TO LEAD HEALTHY AND
FINANCIALLY SECURE LIVES.

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

ORGANIZATIONAL CAPACITY BUILDING:

UNITED WAY OF NEW YORK CITY MOBILIZES RESOURCES STABILIZE, STRENGTHEN
AND SUSTAIN NON-PROFITS TO DELIVER HIGH QUALITY SERVICES THAT IMPPROVE
THE LIVES OF LOW-INCOME NEW YORKERS.

UWNYC WORKS WITH A CROSS-SECTION OF PARTNERS TO IMPLEMENT INITIATIVES
AND PROMOTE PRACTICES THAT STRENGTHEN AND SUPPORT THE RANGE OF THE
CITY'S NONPROFITS. UWNYC STRENGTHENS THE SECTOR THROUGH: BOARD

Name of the organization

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DEVELOPMENT; GRANT MAKING; BOTH SYSTEMIC AND DIRECT APPROACHES TO
EXPANDED ACCESS TO RESOURCES; LEARNING OPPORTUNITIES TO BUILD
ORGANIZATIONAL CAPACITY; AND SECTOR-WIDE ADVOCACY FOR THE ECONOMIC
WELL-BEING OF ALL NEW YORKERS.

EXPENSES \$ 2,064,167. INCLUDING GRANTS OF \$ 1,534,746. REVENUE \$ 0.

EDUCATION 2016/2017

ATTENDANCE IMPROVEMENT DROPOUT PREVENTION (AIDP) SERVICES
FOR OVER TWO DECADES, UNITED WAY OF NEW YORK CITY (UWNYC) AND THE NEW
YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE
ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW
YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. THROUGH THIS INITIATIVE,
COMMUNITY-BASED ORGANIZATIONS (CBOS) ARE PARTNERED WITH NYCDOE
DESIGNATED SCHOOLS TO PROVIDE SERVICES TO ELIGIBLE STUDENTS AND THEIR
FAMILIES.

READNYC

READNYC IS A UNITED WAY OF NEW YORK CITY'S CAMPAIGN FOR GRADE-LEVEL
READING. THROUGH A COLLECTIVE IMPACT APPROACH, THIS INITIATIVE SUPPORTS
ATTAINMENT OF GRADE LEVEL READING BY 3RD GRADE AND FOCUSES ON THE
POOREST COMMUNITIES IN NEW YORK CITY. WE BRING TOGETHER COMMUNITY BASED
ORGANIZATIONS, FUNDERS, GOVERNMENT OFFICIALS, SCHOOLS, PARENTS,
FAMILIES AND MORE, IN ORDER TO WORK TOGETHER TO IMPROVE LITERACY
OUTCOMES FOR NYC'S CHILDREN.

INCOME 2016/2017

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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.

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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 2016/2017

HUNGER PREVENTION AND NUTRITION ASSISTANCE PROGRAM (HPNAP)

THROUGH THE NEW YORK STATE DEPARTMENT OF HEALTH FUNDED HPNAP PROGRAM, UWNYC HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES. THE PROGRAM PROVIDES UP TO 50 MILLION HPNAP SUPPORTED MEALS TO FOOD INSECURE NEW YORKERS THROUGH A NETWORK OF OVER 300 FOOD PANTRIES AND SOUP KITCHES THROUGHOUT NEW YORK CITY ON AN ANNUAL BASIS.

FOOD ASSISTANCE COLLABORATIVE

UWNYC WORKS AS A PARTNER AND FINANCIAL STEWARD FOR THE FAC, WHICH PROVIDES OPERATING AND CAPACITY BUILDING SUPPORT TO FOOD PANTRIES AND

Name of the organization

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Employer identification number

-*7681

ORGANIZATIONS SUPPORTING FOOD PANTRIES ACROSS NEW YORK CITY.

ORGANIZATIONAL CAPACITY BUILDING 2016/2017

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.

EXPENSES \$ 15,401,258. INCL GRANTS OF \$ 15,401,258. REVENUE \$ 120,419.

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

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

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

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. 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:

CA, CT, DC, FL, GA, IL, MD, MA, MN, NJ, NY, NC, ND, OH, PA, RI, SC, VA

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

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

-*7681

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	2,532,919.
PROVISION FOR UNCOLLECIBLE RECEIVABLES	-694,092.
CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERTEPUTAL TRUST	51,191.
TOTAL TO FORM 990, PART XI, LINE 9	1,890,018.

FORM 990, PART XII, LINE 2C:

HAS NOT BEEN CHANGED FROM THE PRIOR YEAR.

FORM 990, SCHEDULE I, PART II:

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

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	UNITED WAY OF NEW YORK CITY	** - *** 7681
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	205 EAST 42ND STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	NEW YORK, NY 10017	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

GINA GOODENOW, SVP AND CFO.

- The books are in the care of ► **205 EAST 42ND STREET - NEW YORK, NY 10017**

Telephone No. ► **(212) 251-4042**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year _____ or

► ☒ tax year beginning **JUL 1, 2016**, and ending **JUN 30, 2017**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**Exempt Organization Declaration and Signature for
Electronic Filing**

OMB No. 1545-1879

For calendar year 2016, or tax year beginning JUL 1, 2016, and ending JUN 30, 2017**2016**Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681**Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	62,476,395.
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	

Part II Declaration of Officer

6 ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign
Here

Lisa Bodorau
Signature of officer

Date

1/5/3/18

SVP AND CFO

Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN
					Phone no.

MARKS PANETH LLP
685 THIRD AVENUE
NEW YORK, NY 10017

P00227472
11-3518842
212-503-8800

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name				Firm's EIN
	Firm's address				Phone no.