

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning July 1, 2017, and ending June 30, 2018

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

C Name of organization Town of Palm Beach United Way, Inc.
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) 44 Coconut Row Room/suite M-201
 City or town, state or province, country, and ZIP or foreign postal code Palm Beach, FL 33480

D Employer identification number 59-0637885

E Telephone number 561-655-1919

F Name and address of principal officer: Elizabeth Walton
PO Box 1141, Palm Beach, FL 33480

G Gross receipts \$ 4,314,286

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: ▶ www.palmbeachunitedway.org

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1945 **M** State of legal domicile: FL

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>The Town of Palm Beach United Way is committed to building a healthy community by helping people care for one another, and investing in programs that build a better life for all by focusing on improving education, income and health.</u>		
	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)	3	79
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	79
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	8
	6	Total number of volunteers (estimate if necessary)	6	380
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	380
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	5,281,372	3,936,245
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	89,684	378,041
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,371,056	4,314,286
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,814,392	3,729,966
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	442,875	476,690
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	408,855	391,496
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4,666,122	4,598,152
	19	Revenue less expenses. Subtract line 18 from line 12	704,934	-283,866
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	15,002,787	14,683,307
	22	Net assets or fund balances. Subtract line 21 from line 20	3,515,468	3,309,844
		11,487,319	11,373,463	

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: Elizabeth Walton CEO Date: 11-12-2018

Type or print name and title

Paid Preparer Use Only

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

Firm's name: _____ Firm's EIN: _____

Firm's address: _____ Phone no.: _____

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

To help people community-wide improve their quality of life.

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 \$ 1,555,947 including grants of \$ 1,381,100) (Revenue \$)

BUILD HEALTHIER COMMUNITIES FOR ALL

Investments in health lift people out of poverty because healthy community members are more productive and require fewer government services and costly institutional care. Good health is an essential ingredient for individual success and a thriving community. The Town of Palm Beach United Way invested \$1,381,100 into health programs in Palm Beach County that helped 50,052 individuals and families.

4b (Code:) (Expenses \$ 1,141,246 including grants of \$ 1,013,000) (Revenue \$)

HELPING ADULTS ACHIEVE FINANCIAL STABILITY AND STRENGTHEN THE SAFETY NET

Investments in financial stability lift people out of poverty because they allow working adults to build valuable skills so they can earn more, pay down debt, develop assets and save for the future. Investments in basic needs help out our most vulnerable neighbors get back on their feet in time of crisis. The Town of Palm Beach United Way invested \$1,013,000 into financial stability programs in Palm Beach County that helped 299,831 residents.

4c (Code:) (Expenses \$ 999,970 including grants of \$ 887,600) (Revenue \$)

IMPROVE OUR CHILDREN'S EDUCATION

Investments in education lift people out of poverty because children who have access to a high-quality education from cradle to career position themselves for work that pays a family-sustaining wage. The returns on investing in our children are phenomenal. The Town of Palm Beach United Way invested \$887,600 into education programs that helped 11,021 children and adults.

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

(Expenses \$ 505,094 including grants of \$ 448,266) (Revenue \$)

4e Total program service expenses 4,202,257

Part IV Checklist of Required Schedules

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<input type="checkbox"/>	<input type="checkbox"/>
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<input type="checkbox"/>	<input type="checkbox"/>
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>
2b	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 <i>e-file</i> (see instructions)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
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)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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).	<input type="checkbox"/>	<input type="checkbox"/>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d	If "Yes," indicate the number of Forms 8282 filed during the year	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<input type="checkbox"/>	<input type="checkbox"/>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<input type="checkbox"/>	<input type="checkbox"/>
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	<input type="checkbox"/>	<input type="checkbox"/>
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<input type="checkbox"/>	<input type="checkbox"/>
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	<input type="checkbox"/>	<input type="checkbox"/>
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<input type="checkbox"/>	<input type="checkbox"/>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<input type="checkbox"/>	<input type="checkbox"/>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<input type="checkbox"/>	<input type="checkbox"/>
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.	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>
c	Enter the amount of reserves on hand	<input type="checkbox"/>	<input type="checkbox"/>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>

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 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.	79	
1b	Enter the number of voting members included in line 1a, above, who are independent	79	
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?		✓
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?		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		✓
6	Did the organization have members or stockholders?	✓	
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?	✓	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	✓	
b	Each committee with authority to act on behalf of the governing body?	✓	
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		✓

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

	Yes	No
10a		✓
10b		
11a	✓	
11b		
12a	✓	
12b	✓	
12c	✓	
13	✓	
14	✓	
15a	✓	
15b	✓	
16a		✓
16b		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► Florida
- 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: ►
 Elizabeth Walton, 44 Coconut Row, Suite 201, Palm Beach, FL 33480 561-655-1919

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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) Nicole Atkinson Trustee	1	✓					0	0	0	
(2) Kathy Bleznak Trustee	1	✓					0	0	0	
(3) Cynthia Boardman Trustee	1	✓					0	0	0	
(4) Jack Borland Trustee	1	✓					0	0	0	
(5) James Borynack Trustee	1	✓					0	0	0	
(6) Sean Besnan Trustee	1	✓					0	0	0	
(7) Nancy Brinker Trustee	1	✓					0	0	0	
(8) Paula Butler Trustee	1	✓					0	0	0	
(9) Marvin Davidson Trustee	1	✓					0	0	0	
(10) Tasha Dickinson Trustee	1	✓					0	0	0	
(11) Michael Donnell Trustee	1	✓					0	0	0	
(12) David Duffy Trustee	1	✓					0	0	0	
(13) Sheila Fine Trustee	1	✓					0	0	0	
(14) Lynn Foster Trustee	1	✓					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 dotted 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			
(15) George Garfunkel Trustee	1	✓					0	0	0	
(16) Bruce Gendelman Trustee	1	✓					0	0	0	
(17) Juliana Gendelman Trustee	1	✓					0	0	0	
(18) Sarah Gewirz Trustee	1	✓					0	0	0	
(19) Mary Gilbane Trustee	1	✓					0	0	0	
(20) Roni Goldsmith Trustee	1	✓					0	0	0	
(21) Benjamin Gordon Trustee	1	✓					0	0	0	
(22) Lee Gordon Trustee	1	✓					0	0	0	
(23) Louis Guyott Trustee	1	✓					0	0	0	
(24) Ann Heathwood Trustee	1	✓					0	0	0	
(25) Vanessa Henry Trustee	1	✓					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A							133,798		21,126	
d Total (add lines 1b and 1c)							133,798		21,126	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization										

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		✓
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		✓

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns				
	1b	Membership dues				
	1c	Fundraising events				
	1d	Related organizations				
	1e	Government grants (contributions)				
	1f	All other contributions, gifts, grants, and similar amounts not included above	3,936,245			
	g	Noncash contributions included in lines 1a-1f: \$	82,671			
	h	Total. Add lines 1a-1f	3,936,245			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f	All other program service revenue .				
	g	Total. Add lines 2a-2f				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	378,041			378,041
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real				
		(ii) Personal				
	6a	Gross rents				
	b	Less: rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	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)				
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
b	Less: direct expenses					
c	Net income or (loss) from fundraising events					
9a	Gross income from gaming activities. See Part IV, line 19					
b	Less: direct expenses					
c	Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances					
b	Less: cost of goods sold					
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See instructions.		4,314,286			378,041

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	3,729,966	3,729,966		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	133,798	72,251	12,042	49,505
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	231,805	125,175	20,862	85,768
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	43,769	23,636	3,939	16,194
9 Other employee benefits	42,731	23,075	3,846	15,810
10 Payroll taxes	24,587	13,277	2,213	9,097
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	21,140	11,416	1,902	7,822
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	16,628	8,979	1,497	6,152
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	4,347	2,348	391	1,608
13 Office expenses	64,040	34,581	5,764	23,695
14 Information technology	17,873	9,651	1,609	6,613
15 Royalties				
16 Occupancy	25,893	13,983	2,330	9,580
17 Travel	3,000	1,620	270	1,110
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	112,121	60,545	10,091	41,485
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	18,416	9,945	1,657	6,814
23 Insurance	12,567	6,786	1,131	4,650
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 Dues / subscriptions	57,113	30,841	5,140	21,132
b Telephone / postage	22,070	11,918	1,986	8,166
c Agency expenses	7,541	7,541		
d Donor cultivation / DeTocqueville	8,747	4,723	788	3,236
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,598,152	4,202,257	77,458	318,437
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	7,051,374	1	5,349,994
	2	Savings and temporary cash investments	2,158,914	2	2,238,677
	3	Pledges and grants receivable, net	296,684	3	349,545
	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 instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	5,056	9	28,041
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	409,277		
	b	Less: accumulated depreciation	378,697	10c	30,580
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	5,459,997	15	6,686,470
16	Total assets. Add lines 1 through 15 (must equal line 34)	15,002,787	16	14,683,307	
Liabilities	17	Accounts payable and accrued expenses	22,408	17	28,144
	18	Grants payable	3,493,060	18	3,281,700
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	3,515,468	26	3,309,844
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	4,962,746	27	4,668,005
	28	Temporarily restricted net assets	1,820,683	28	1,971,107
	29	Permanently restricted net assets	4,703,890	29	4,734,351
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" 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	11,487,319	33	11,373,463
34	Total liabilities and net assets/fund balances	15,002,787	34	14,683,307	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,314,286
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,598,152
3	Revenue less expenses. Subtract line 2 from line 1	3	-283,866
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,487,319
5	Net unrealized gains (losses) on investments	5	115,677
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-25,430
9	Other changes in net assets or fund balances (explain in Schedule O)	9	79,763
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,373,463

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

Town of Palm Beach United Way, Inc.

Employer identification number

59-0637885

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		
(A)						
(B)						
(C)						
(D)						
(E)						
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,431,949	5,557,918	6,025,437	5,281,372	3,936,245	25,232,921
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.	4,431,949	5,557,918	6,025,437	5,281,372	3,936,245	25,232,921
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						5,042,540
						20,190,381

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	4,431,949	5,557,918	6,025,437	5,281,372	3,936,245	25,232,921
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	544,533	374,312	287,629	89,684	378,041	1,674,199
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.)						
11 Total support. Add lines 7 through 10						26,907,120
12 Gross receipts from related activities, etc. (see instructions)					12	

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

Section C. Computation of Public Support Percentage

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

14	75 %
----	------
- 15 Public support percentage from 2016 Schedule A, Part II, line 14

15	71 %
----	------
- 16a **33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b **33 1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

- 19a **33 1/3% support tests—2017.** 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—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Table with 10 columns (1-10b) and 10 rows (1-10). Each row contains a question regarding the organization's status, control, and support, with corresponding 'Yes' and 'No' checkboxes.

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <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.	Yes	No
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).		

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

Section D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
e	Excess from 2017			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

Name of the organization

Employer identification number

Town of Palm Beach United Way, Inc.

59-0637885

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 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?

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 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)?, 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.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,680,062	6,713,707	7,029,210	6,255,713	5,767,684
b Contributions	336,733	315,735	198,291	974,833	1,825
c Net investment earnings, gains, and losses	468,602	725,386	-137,461	-65,963	759,733
d Grants or scholarships				-67,500	
e Other expenditures for facilities and programs					
f Administrative expenses	-50,001	-74,766	-376,333	-67,873	-273,529
g End of year balance	8,435,396	7,680,062	6,713,707	7,029,210	6,255,713

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ 26.31%
 - b Permanent endowment ▶ 56.13%
 - c Temporarily restricted endowment ▶ 17.56%
- The percentages on lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

- 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				
d Equipment		257,551	235,850	21,701
e Other		151,726	142,847	8,879
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				30,580

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) Investments in endowments.	6,686,470
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	4,594,654
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	115,677	
b	Donated services and use of facilities	2b	84,928	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	79,763	
e	Add lines 2a through 2d	2e		280,368
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		4,314,286

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	4,708,510
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	84,928	
b	Prior year adjustments	2b	25,430	
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		110,358
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		4,598,152

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, Endowment Funds: The intended use of the organization's endowment fund is to generate annual transfers of income which together with the earnings of the general unrestricted funds and reserve funds of the organization will fully subsidize the annual operating expenses without eroding the original corpus.

Part X, Line 1. (1): Income Taxes: The organization is a not-for-profit organization exempt from income taxes under Internal Revenue Code Section 501(c)(3). The organization is classified as a publicly supported organization that is not a private foundation. The organization evaluates its uncertain tax positions in accordance with FASB ASC 740, Income Taxes, which states that management's determination of the taxable status of an entity, including its status as a tax-exempt entity, is a tax position subject to the standards required for accounting for uncertainty in income taxes. Management does not believe that the organization has any significant uncertain tax positions that would be material to the financial statements. The organization remains subject to examinations by major tax jurisdictions for tax years ending after 2014.

Part XI, Line 2d, OTHER: Change in value of beneficial interests in trusts.

**SCHEDULE I
(Form 990)**

**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.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service
Name of the organization

▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Employer identification number

59-0637885

Town of Palm Beach United Way, Inc.

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) see attached schedule			3,729,966				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 65
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Cat. No. 50055P

Schedule I (Form 990) (2017)

Grants and Other Assistance to Organizations

(a) Name and Address of Organization	(b) EIN	(c) IRC section	(d) Amount of cash grant	(h) Purpose of grant or assistance
2-1-1 Palm Beach PO Box 3588, Lantana, FL 33465	23-7153017	501(c)(3)	179,200	Grant to support program operating
Achievement Center for Children & Families 555 NW 4th Street, Delray Beach, FL 33444	59-1264435	501(c)(3)	21,719	Grant to support program operating
ARC of the Glades 4250 NW 16th, Belle Glade, FL 33430	59-1760374	501(c)(3)	13,800	Grant to support program operating
ARC of Palm Beach County 1201 Australian, Riviera Beach, FL 33404	59-0883386	501(c)(3)	192,600	Grant to support program operating
Adopt-A-Family 1712 N Second, Lake Worth, FL 33460	59-2471253	501(c)(3)	197,100	Grant to support program operating and donor designation for general support
Aid to Victims of Domestic Abuse PO Box 6167, Delray Beach, FL 33482	59-2486620	501(c)(3)	70,800	Grant to support program operating
Alpert Jewish Family & Children's Service PO Box 220627, WPB, FL 33422	59-1520581	501(c)(3)	77,250	Grant to support program operating
Alzheimer's Community Care 800 Northpoint, WPB, FL 33407	31-1481653	501(c)(3)	74,000	Grant to support program operating
Blankets of Love Palm Beach 1525 Flagler Dr., Ste 100, WPB, FL 33401	81-4311372	501(c)(3)	200	Grant to support program operating
Boys & Girls Clubs of PBC 800 Northpoint, WPB, FL 33407	23-7060561	501(c)(3)	281,950	Grant to support program operating and donor designation for general support
Caridad Center 8545 W Boynton Beach, Boynton Bch, FL 33437	65-0149423	501(c)(3)	160,000	Grant to support program operating
Catholic Charities PB Box 109650, Palm Beach Gardens, FL 33410	59-2470479	501(c)(3)	30,000	Grant to support program operating and donor designation for general support
Center for Child Counseling 7731 N Military Trail, PBG, FL 33410	65-0932032	501(c)(3)	38,500	Grant to support program operating
Center for Family Services 4101 Parker, WPB, FL 33405	59-1084179	501(c)(3)	20,000	Grant to support program operating
Children's Home Society 3333 Forest Hill, WPB, FL 33406	59-0192430	501(c)(3)	20,100	Grant to support program operating and donor designation for general support
Clinics Can Help 2560 Westgate Avenue, WPB, FL 33409	20-2778895	501(c)(3)	30,000	Grant to support program operating
Community Back to School 1712 N Second, Lake Worth, FL 33460	59-2471253	501(c)(3)	1,000	Grant to support school supplies
Community Foundation PB & Martin Counties 700 S Dixie Hwy., W Palm Beach, FL 33401	23-7181875	501(c)(3)	4,960	Grants to support operating Impact 100
C.R.O.S Ministries 301 S First, Lake Worth FL 33460	59-1802917	501(c)(3)	35,000	Grant to support program operating

Grants and Other Assistance to Organizations

Drug Abuse Foundation 400 South Swinton, Delray Beach, FL 33444	23-7074625	501(c)(3)	120,000	Grant to support program operating
DATA 1016 North Clemons, Jupiter, FL 33477	59-1363887	501(c)(3)	171,000	Grant to support program operating
El Sol 106 Military Trail, Jupiter, FL 33458	01-0870672	501(c)(3)	43,715	Grant to support program operating
Families First of PBC 3333 Forest Hill, WPB, FL 33406	65-0166352	501(c)(3)	76,400	Grant to support program operating costs and donor designation for general support
Farmworker Coordinating Council 1313 Central, Lake Worth, FL 33460	59-1830267	501(c)(3)	112,050	Grant to support program operating
Feeding South Florida 4925 Park Ridge Blvd., Boynton Beach, FL 33426	59-2097520	501(c)(3)	49,943	Grant to support program operating
Coastal Bend Food Bank 826 Krill St., Corpus Christ, TX 78408	74-2234089	501(c)(3)	15,000	Grant to support hurricane damage
Forgotten Soldiers Outreach 3550 S 23rd Ave., Lake Worth, FL 33461	51-0493205	501(c)(3)	200	Grant to support program operating
Galaxi Elementary 550 NW 4th Ave., Boynton Beach, FL 33435	59-6000783	501(c)(3)	850	Grant to support school supplies
Genesis Community Health 2623 S Seacrest Blvd., Suite 65, Boynton Bch, FL 33435	80-0374741	501(c)(3)	9,000	Grant to support program operating
Glades Initiative 141 S.E. Avenue C, Belle Glade, FL 33430	01-0733180	501(c)(3)	118,715	Grant to support program operating and donor designation for food
Gulfstream Goodwill Industries 1715 East Tiffany, WPB, FL 33407	59-1197040	501(c)(3)	35,000	Grant to support program operating
Habitat for Humanity 1225 South Military Trail, WPB, FL 33415	59-3525576	501(c)(3)	11,500	Grant to support program operating
Healthy Mothers/Healthy Babies 500 Gulfstream, Delray Beach, FL 33483	59-2657051	501(c)(3)	19,000	Grant to support program operating
Home Safe 2840 South Sixth, Lake Worth, FL 33461	59-1935485	501(c)(3)	98,720	Grant to support program operating
Homeless Coalition of PBC 810 Datura Street 2nd Floor, WPB, FL 33401	65-0125852	501(c)(3)	22,000	Grant to support program operating
Houston Humane Society 14700 Almeda Road, Houston, TX 77053	74-1340341	501(c)(3)	5,000	Grant to support hurricane damage
Jewish Community Center 8500 Jog, Boynton Beach, FL 33472	59-1582799	501(c)(3)	7,500	Grant to support program operating
Leukemia & Lymphoma Society 4360 Northlake Blvd., PBG, FL 33410	13-5644916	501(c)(3)	1,150	Grant to support program operating
Legal Aid Society 423 Fern, WPB, FL 33401	59-6046994	501(c)(3)	60,500	Grant to support program operating

Grants and Other Assistance to Organizations

Lord's Place PO Box 3265, WPB, FL 33402	59-2240502	501(c)(3)	173,350	Grant to support program operating
Malaleuca Elementary 5759 W Gun Road, WPB, FL 33415	59-6000783	501(c)(3)	850	Grant to support school supplies
Meals on Wheels PO Box 247, W Palm Beach, FL 33402	27-2891297	501(c)(3)	750	Grant to support Thanksgiving meals
Milagro Center 340 SW 6th, Delray Beach, FL 33444	65-0804625	501(c)(3)	50,000	Grant to support program operating
Operating Helping Hands PO Box 459007, Miami, FL 33245	59-0830840	501(c)(3)	30,000	Grant to support hurricane relief
Operation Homefront 1355 S Central Park Way, St Antonio, TX 78232	32-0033325	501(c)(3)	750	Grant to support hurricane relief
Opportunity, Inc. 1713 Quail Drive, WPB, FL 33409	59-0624429	501(c)(3)	177,501	Grants to support program operating and donor designation for general support
Palm Beach County Food Bank 525 Gator Drive, Lantana, FL 33462	90-0788707	501(c)(3)	15,000	Grant to support program operating
Palm Beach Habilitation Center 4522 S Congress Avenue, Lake Worth, FL 33461	59-6213381	501(c)(3)	231,080	Grant to support program operating
Palm Beach County Literacy Coalition 551 SE 8th Street, Delray Beach, FL 33483	65-0169791	501(c)(3)	117,000	Grant to support program operating costs and donor designation for general support
Palm Beach State College 4200 Congress Avenue, Lake Worth, FL 33461	59-1216000	501(c)(3)	1,500	Grant to support STEM program
Palm Healthcare Foundation 700 S Dixie Hwy., WPB, FL 33401	59-2391119	501(c)(3)	12,000	Grant to support opioid crisis
Parent Child Center 2001 W Blue Heron, Riviera Beach, FL 33404	59-1964034	501(c)(3)	19,715	Grant to support program operating
Planned Parenthood 2300 North Florida Mango, WPB, FL 33409	59-1391115	501(c)(3)	86,000	Grant to support program operating and donor designation for general support
Pediatric Oncology Support Team 5325 Greenwood Ave., No. 301, WPB, FL 33407	45-4769367	501(c)(3)	500	Grant to support program operating
Roosevelt Elementary 1220 15th Street, WPB, FL 33407	59-6000783	501(c)(3)	850	Grant to support school supplies
Seagull Industries for the Disabled 3879 W Industrial Way, Riviera Beach, FL 33404	59-1879968	501(c)(3)	67,000	Grant to support program operating
Take Stock In Children 1896 Palm Beach Lakes, WPB, FL 33409	59-3331584	501(c)(3)	59,658	Grant to support program operating
St George's Episcopal Church 21 W 22nd Street, WPB, FL 33404	59-1318856	501(c)(3)	50	Grant to support program operating
United Way of America 701 N Fairfax Street, Alexandria, VA 22314	13-1635294	501(c)(3)	2,790	Grant to support hurricane relief

Grants and Other Assistance to Organizations

United Way of the Florida Keys PO Box 2143, Key West, FL 33045	59-1288630	501(c)(3)	30,000	Grant to support hurricane relief
United Way of Greater Houston 50 Waugh Drive, Houston, TX 77007	74-1167964	501(c)(3)	30,000	Grant to support hurricane relief
Urban League 1700 North Australian, WPB, FL 33407	59-1533710	501(c)(3)	14,500	Grant to support program operating
Urban Youth Impact PO Box 222592, West Palm Beach, FL 33422	91-1901103	501(c)(3)	27,700	Grant to support program operating
YMCA of South Palm Beach 6631 S Palmetto Circle, Boca Raton, FL 33431	59-1416281	501(c)(3)	5,000	Grant to support program operating
YWCA of Palm Beach County 2200 N FL Mango Road, WPB, FL 33409	59-1416281	501(c)(3)	151,000	Grant to support program operating

total grants

3,729,966

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2017

Open to Public Inspection

Town of Palm Beach United Way, Inc.

Employer identification number

59-0637885

Part I Questions Regarding Compensation

	Yes	No
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"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<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.		
1b		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		
2		
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 type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input 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?		✓
4a		✓
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		✓
4b		✓
c Participate in, or receive payment from, an equity-based compensation arrangement?		✓
4c		✓
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?		✓
5a		✓
b Any related organization?		✓
5b		✓
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?		✓
6a		✓
b Any related organization?		✓
6b		✓
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.		✓
7		✓
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		✓
8		✓
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		
9		

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Non-taxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (E) reported as deferred on prior Form 990	(B) Breakdown of W-2 and/or 1099-MISC compensation	
								(i) Base compensation	(ii) Bonus & incentive compensation
1 Elizabeth Walton, Pres & CEO	133,798			21,126		154,924		(i)	(ii)
2								(i)	(ii)
3								(i)	(ii)
4								(i)	(ii)
5								(i)	(ii)
6								(i)	(ii)
7								(i)	(ii)
8								(i)	(ii)
9								(i)	(ii)
10								(i)	(ii)
11								(i)	(ii)
12								(i)	(ii)
13								(i)	(ii)
14								(i)	(ii)
15								(i)	(ii)
16								(i)	(ii)

**SCHEDULE J-2
(Form 990)**

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

**Open to Public
Inspection**

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

Department of the Treasury
Internal Revenue Service

Name of the Organization

Town of Palm Beach United Way, Inc.

Page 1 of 3

Employer identification number

59 : 0637885

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(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			
[26] Vicky Hunt Trustee	1	✓					0	0	0	
[27] Darlene Jordan Trustee	1	✓					0	0	0	
[28] Jason Kalisman Trustee	1	✓					0	0	0	
[29] Sir Geoffrey Leigh Trustee	1	✓					0	0	0	
[30] Ellen Liman Trustee	1	✓					0	0	0	
[31] Matthew Lorentzen Trustee	1	✓					0	0	0	
[32] Robin Martin Trustee	1	✓					0	0	0	
[33] Kristina McPherson Trustee	1	✓					0	0	0	
[34] Harriet Miller Trustee	1	✓					0	0	0	
[35] Patricia Mintmire Trustee	1	✓					0	0	0	
[36] Esther Murray Trustee	1	✓					0	0	0	
[37] Heidi Niblack Trustee	1	✓					0	0	0	
[38] Gary Pohrer Trustee	1	✓					0	0	0	
[39] Daniel Ponton Trustee	1	✓					0	0	0	
[40] Tom Quick Trustee	1	✓					0	0	0	
[41] Cater Randolph Trustee	1	✓					0	0	0	
[42] Joyce Reingold Trustee	1	✓					0	0	0	
[43] Lyn Ross Trustee	1	✓					0	0	0	
[44] Richard Rothschild Trustee	1	✓					0	0	0	
[45] Jennifer Saville Trustee	1	✓					0	0	0	
[46] Linda Saville Trustee	1	✓					0	0	0	

**SCHEDULE J-2
(Form 990)**

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the Organization

Town of Palm Beach United Way, Inc.

Page 2 of 3

Employer identification number

59 ; 0637885

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(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			
[47] John Scarpa Trustee	1	✓					0	0	0	
[48] Ed Schmidt Trustee	1	✓					0	0	0	
[49] Laurie Silvers Trustee	1	✓					0	0	0	
[50] Jessica Surovek Trustee	1	✓					0	0	0	
[51] Dominick Telesco Trustee	1	✓					0	0	0	
[52] James Thompson Trustee	1	✓					0	0	0	
[53] Wally Turner Trustee	1	✓					0	0	0	
[54] Richard Wackenhut Trustee	1	✓					0	0	0	
[55] Dan Wilkinson Trustee	1	✓					0	0	0	
[56] Lisa Wilkinson Trustee	1	✓					0	0	0	
[57] Rebecca Williams Trustee	1	✓					0	0	0	
[58] Robert Wright Trustee	1	✓					0	0	0	
[59] Susan Wright Trustee	1	✓					0	0	0	
[60] Allen Wyatt Trustee	1	✓					0	0	0	
[61] Missy Agnello Treasurer	1	✓	✓				0	0	0	
[62] Ann-Britt Angle Executive Committee	1	✓	✓				0	0	0	
[63] Jay Boodheshwar Chairman	1	✓	✓				0	0	0	
[64] Jorge Cabrera Assistant Treasurer	1	✓	✓				0	0	0	
[65] Gail Coniglio Secretary	1	✓	✓				0	0	0	
[66] Mark Cook Vice Chairman	1	✓	✓				0	0	0	
[67] Christine Curtis Vice Chairwoman	1	✓	✓				0	0	0	

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

Town of Palm Beach United Way, Inc.

59-0637885

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	✓	7	82,671	Stock quote
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 ▶ (.)				
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

	Yes	No
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.		

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

Town of Palm Beach United Way, Inc.

Employer identification number

Page 1

59-0637885

Form 990, Part I, Line 6, VOLUNTEERS: The Town of Palm Beach United Way has volunteers that assist the organization in a variety of capacities and are a key component to the success of the organization. The Town of Palm Beach United Way relies heavily on the guidance of key volunteers to approve budgets and grant distributions to the community. Our 380 volunteers serve in several positions that include board policy making, campaign, allocations, endowment, and a variety of direct services.

Form 990, Part III, Line 4d, Other program services:

EMERGENCY RELIEF FUND [\$180,166] When an emergency strikes, whether locally in Palm Beach County or across the world, the Town of Palm Beach United Way provides assistance to agencies and people in need.

Form 990, Part III, Line 4d, Other program services:

DONOR DESIGNATED DOLLARS TO NON-MEMBER AGENCIES: [\$268,100]

We processed \$268,100 in donor-designated funds. Donor-designated funds are contributions specifically directed by the donor to be forwarded to other nonprofit organizations, the Town of Palm Beach United Way acts simply as an agent that collects, processes and disburses the funds. We provide this service as a convenience to our donors. Since it is not mission-oriented function, we do not require the recipient organizations to provide us with information relative to the use and results of these contributions.

NINETH ANNUAL TURKEY TROT:

Proceeds from our annual 5K Turkey Trot are donated to local nonprofits agencies to feed families in need on Thanksgiving. Agencies that received funding for Thanksgiving meals last year were:

Achievement Centers – 382 Thanksgiving meals for the students and families at Pine Grove Elementary.

Adopt-a-Family – 80 Thanksgiving meals for families.

Alpert Jewish Family and Children Services – 160 Thanksgiving meals for families.

ARC of the Glades – 50 Thanksgiving meals for their clients and their caregivers.

Aid to Victims of Domestic Abuse – 80 Thanksgiving meals for women and their children at the shelter.

Boys and Girls Clubs – 300 Thanksgiving meals for Club members at the Belle Glade Teen Center and their families.

EI Sol – 200 Thanksgiving meals for their clients and their families.

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

Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

Town of Palm Beach United Way, Inc.

Employer identification number

Page 2

59-0637885

NINETH ANNUAL TURKEY TROT: cont.

Families First – 320 Thanksgiving meals for families

Farmworker Coordinating Council – 125 Thanksgiving meals for clients and their families.

Healthy Mothers Healthy Babies – 180 infant packs for babies.

Home Safe – 60 Thanksgiving meals for men, women and children in their group homes.

Lord's Place – 250 Thanksgiving meals for men, women and children at their shelters.

Meals on Wheels – 100 Thanksgiving meals for clients.

Milagro Center – 100 Thanksgiving meals for clients and their families.

Opportunity, Inc. – 172 Thanksgiving meals for students and their families.

Palm Beach Habilitation Center – 250 Thanksgiving meals for clients.

Parent-Child Center – 100 Thanksgiving meals for clients.

Seagull Industries – 235 Thanksgiving meals for clients and staff.

Take Stock in Children – 40 Thanksgiving meals for students and their families.

Urban Youth Impact – 150 Thanksgiving meals for students at the Dream Center and their families.

ANNUAL FOOD DRIVE (\$1,600)

In partnership with the Palm Beach Daily News and Town of Palm Beach Fire Rescue; this is an annual fundraising campaign to provide non-perishable food and grant assistance specific for the purchase of food for agencies in Palm Beach County to distribute to those in need.

Administrative support is provided by the Town of Palm Beach United Way. This year 2,215 pounds of non-perishable food, along with \$1,600 were collected. The food and grants were distributed equally to Farmworkers Coordinating Council and Feeding South Florida.

ANNUAL TOY DRIVE (\$9,645)

In partnership with the Palm Beach Daily News and Town of Palm Beach Fire Rescue; this is an annual fundraising campaign to provide toys, gift cards and grant assistance specific for the purchase of toys for agencies in Palm Beach County to distribute to those in need.

Administrative support is provided by the Town of Palm Beach United Way. This year hundreds of toys and \$9,645 in checks were collected. The toys, gift cards and grants were distributed equally to El Sol, The Glades Initiative and the Parent-Child Center.

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.
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OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

Town of Palm Beach United Way, Inc.

Employer identification number

Page 3

59-0637885

Form 990, Part III, Line 4d, Other program services: cont.

BOXED FOR SUCCESS SCHOOL SUPPLY DRIVE (\$2,575):

Supporters of the Town of Palm Beach United Way were asked to donate elementary school supplies in decorated shoe boxes to be donated to three local Title I elementary schools. Among the collected items were 3,568 crayons, 2,783 pencils, 494 glue sticks, 1,217 markers, 248 erasers and thousands of other items, along with \$2,575 in checks. This year's recipients were Melaleuca, Roosevelt and Galaxy Elementary.

Form 990, Part VI, Section B, Line 11a:

Form 990 is prepared by the Town of Palm Beach United Way's bookkeeper. A draft of Form 990 is reviewed by the CEO and the audit firm Caler, Donten, Levine, Cohen, Porter & Veil, P.A., then is presented to the Audit Committee for review. A final version of Form 990 is presented to the Board of Trustees for review. Once reviewed the 990 is filed and posted on agency's website.

Form 990, Part VI, Section B, Line 12C: Conflict of Interest:

The Town of Palm Beach United Way annually provides a conflict of interest policy to all staff, Board of Trustee Members and Allocation Committee volunteers. Each are required to sign the conflict of interest statements. The statements are reviewed by the CEO of the Town of Palm Beach United Way, and tracked by the Executive assistant. It is the responsibility of the individual to make the Town of Palm Beach United Way aware of any conflicts that arise after they sign the conflict of interest document. If there is a real or perceived conflict of interest an individual may participate in discussion around a given issue, but will abstain from any vote pertaining to their conflict.

Form 990, Part VI, Section B, Line 15: Policies, Compensation:

The Personnel Committee of the Town of Palm Beach United Way evaluates the Chief Executive. The Chief Executive evaluates the performance of all employees against goals and sets compensation accordingly. The salaries of all employees are ratified by the Board of Trustees.

Name of the organization

Town of Palm Beach United Way, Inc.

Employer identification number

Page 4

59-0637885

Form 990, Part VI, Section C, Line 19: Disclosure:

The Town of Palm Beach United Way makes its governing documents, conflict of interest policy, Form 990 and audits available to the public upon request. The Town of Palm Beach United Way's current 990 and audit are available on the website www.palmbeachunitedway.org.

The Town of Palm Beach United Way's 990 and audit is also available on third party websites:

www.guidestar.org and www.foundationcenter.org

Form 990, Part XI, Line 9: Other changes in net assets or fund balance:

Change in value of beneficial interests in trusts.