DLN: 93493141005090 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number C Name of organization UNITED WAY OF NEW YORK CITY B Check if applicable ☐ Address change 13-2617681 \square Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 205 EAST 42ND STREET E Telephone number ☐ Amended return ☐ Application pending (212) 251-2431 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY $\,$ 10017 G Gross receipts \$ 56,690,141 Name and address of principal officer H(a) Is this a group return for CATHY PETRUCCI subordinates? □Yes **☑**No 205 EAST 42ND STREET H(b) Are all subordinates NEW YORK, NY 10017 ☐ Yes ☐No included? I Tax-exempt status □ 527 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW UNITEDWAYNYC ORG **K** Form of organization lacksquare Corporation lacksquare Trust lacksquare Association lacksquare Other lacksquareL Year of formation 1968 M State of legal domicile NY Summary 1 Briefly describe the organization's mission or most significant activities UNITED WAY OF NEW YORK CITY UNIQUELY WORKS WITH BUSINESS, GOVERNMENT AND (SEE SCHEDULE O) COMMUNITY-BASED NON-PROFITS TO TACKLE THE ROOT CAUSES OF POVERTY WE DESIGN AND INVEST IN EVIDENCE-BASED INITIATIVES THAT ENSURE LOW-INCOME NEW YORKERS ARE ABLE TO MEET BASIC NEEDS AND BUILD A BETTER FUTURE WE RIGOROUSLY EVALUATE OUR WORK AND USE LESSONS LEARNED TO LEVERAGE A WORLDWIDE NETWORK OF UNITED WAYS TO INFORM AND ADVANCE PUBLIC POLICIES THAT PREVENT AND ALLEVIATE POVERTY CITYWIDE UNITED WAY OF NEW YORK CITY FOSTERS A MORE ROBUST AND EFFECTIVE NON-PROFIT SECTOR BY WORKING COLLECTIVELY WITH A CONSORTIUM OF NON-PROFITS WITH SHARED GOALS AND MEASUREMENT TO BRING Activities & Governance SERVICES TO THE PUBLIC IN THE AREAS OF EDUCATION, INCOME AND HEALTH Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net asset Number of voting members of the governing body (Part VI, line 1a) 43 4 43 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 91 Total number of volunteers (estimate if necessary) . . . 6 3,052 7a ٥ Total unrelated business revenue from Part VIII, column (C), line 12 ${f b}$ Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 59,973,152 53,752,423 9 Program service revenue (Part VIII, line 2g) . 107,359 104,476 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 623,831 223,586 42,881 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -2,878 60,701,464 54,123,366 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 46,341,187 41,584,730 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) 8,930,082 7,809,395 16a Professional fundraising fees (Part IX, column (A), line 11e) . 182,750 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶4,475,575 6,640,946 7,300,144 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 62,094,965 56,694,269 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) -1,393,501 -2,570,903 19 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) . 33,339,996 32,015,615 Total liabilities (Part X, line 26) . 24,476,320 25,595,500 Net assets or fund balances Subtract line 21 from line 20 . 8,863,676 6,420,115 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 2020-05-12 Signature of officer Sign Here CATHY PETRUCCI AVP, ASST CONTROLLER Type or print name and title Print/Type preparer's name Preparer's signature Check \square if P00535099 Paid self-employed Firm's name ► MARKS PANETH LLP Firm's EIN > 11-3518842 Preparer Use Only Firm's address ▶ 685 THIRD AVENUE Phone no (212) 503-8800 NEW YORK, NY 10017 May the IRS discuss this return with the preparer shown above? (see instructions) . ✓ Yes □ No For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2018)

Form	990 (2018)					Page 2
Pa	Statement o	of Program Serv	ice Accomplis	hments		
	Check if Schedu	ule O contains a res	ponse or note to a	any line in this Part III .		🗹
1	Briefly describe the org	ganızatıon's mıssıon	1			
MEET OPPO INDI TO A	「AND LEAD SELF-SUFFI DRTUNITIES THAT IMPRO VIDUALS AND FAMILIES	CIENT LIVES OUR OVE THE LIVES OF I HAVE ACCESS TO JUST SHIFT MINDSE	MISSION IS TO M LOW-INCOME NEV QUALITY EDUCAT ETS, PRACTICES, /	OBILIZE OUR COMMUNI V YORKERS FOR THE BE ION AND THE OPPORTUI	TO HELPING LOW-INCOME NE TIES TO BREAK DOWN BARRIE NEFIT OF ALL WE ENVISION A NITY TO LEAD HEALTHY AND F IBORHOODS OF CONCENTRATE	ERS AND BUILD A CITY WHERE ALL INANCIALLY SECURE LIVES
	Did the every service in	malautaka amu arang			ush ware not lested on	
2	=	, -	cant program serv	vices during the year wh	ich were not listed on	□ Yes ☑ No
	the prior Form 990 or If "Yes," describe these					L res L No
3	,			changes in how it condu	cte any program	
•	services? If "Yes," describe these			· · · · · ·		☐ Yes ☑ No
4		501(c)(4) organiza	tions are required	to report the amount of	argest program services, as mo grants and allocations to othe	
4a	(Code) (Expenses \$	20,494,398	including grants of \$	18,712,524) (Revenue \$	323,561)
	See Additional Data				, , , ,	, ,
	-					
4b	(Code) (Expenses \$	7,858,228	including grants of \$	6,522,801) (Revenue \$)
	See Additional Data					
4 c	(Code) (Expenses \$	2,097,764	including grants of \$	930,479) (Revenue \$)
	See Additional Data					
	(Code) (Expenses \$	16,118,216	ıncludıng grants of \$	15,418,926) (Revenue \$	
	INCOMEEMERGENCY FOOI PROVIDES INCOME SUPPO SUPPORT BASIC ENERGY ENSURE THEY ARE PROVIL SUPPORT CONNECTIONS ELIGIBLE NYC INDIVIDUA PROGRAM, WITH SNAP'S ALSO OFFERS PROGRAMS	D AND SHELTER PROG DRT TO LOW-INCOME I NEEDS UNITED WAY (DING THE HIGHEST QI (FSC)UNITED WAY OF L FAMILIES TO ENROL ELECTRONIC BENEFIT TO HELP YOU LEARN ' EFITSWORKING TO DE	RAMTHE EMERGENCY NEW YORKERS ON AID F NEW YORK CITY F JALITY OF SERVICE NEW YORK CITY'S (L L IN SNAP BENEFITS TRANSFER (EBT) CA TO EAT HEALTHILY	Y FOOD AND SHELTER PROG N EMERGENCY BASIS TO PR PROVIDES TECHNICAL ASSIS TO BENEFICIARIES AND THA JWNYC) FOOD SUPPORT CO SNAP, FORMERLY KNOWN RD, HOUSEHOLDS CAN PUR ND BE ACTIVE NONPROFIT	RAM (EFSP), ADMINISTERED BY UN EVENT HUNGER, PRESERVE HOUSIN STANCE TO AGENCIES THAT RECEIX AT THEY ARE MEETING CONTRACTU. NNECTIONS (FSC) PROGRAM IS A R AS FOOD STAMPS, IS THE SUPPLEM CHASE FOOD AND OTHER QUALIFIE PARTNERS CONDUCT GRASSROOTS CATION PROCESS, SCHEDULE APPO	NG, PROVIDE SHELTER, AND VE FUNDING IN ORDER TO AL OBLIGATIONS FOOD SESOURCE FOR INCOME- MENTAL NUTRITION ASSISTANCE ED FOOD-RELATED ITEMS SNAP SOUTREACH AND FACILITATE
4d	Other program service	es (Describe in Sche	dule O)			
	(Expenses \$	16,118,216 ır	cluding grants of	\$ 15,418,9	26) (Revenue \$)
4e	Total program servi	ce expenses >	46,568,6	06		
						Form 990 (2018)

Par	tiv Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😼	1	Yes	
2	g	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8		8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22	Yes	

Form	990 (2018)			Page 4
Par	tiV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No

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

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

36

37

38

Part V

35b

36

37

38

61

0

1a

Yes

Yes

Form 990 (2018)

Nο

Nο

Nο

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

Form **990** (2018)

10a

10b

11a

11b

12b

13b

13c

) 066	2010) Page
t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines
	8a, 8b, or 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

Pa	8a, 8b, or 10b below, describe the circumstances, processes, or changes in School			, csp.		_
	Check if Schedule O contains a response or note to any line in this Part VI			• •	<u> </u>	✓
Se	ction A. Governing Body and Management					
_		ı	ı		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	43			
	To these are material differences in voting wights among members of the governing					
	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					
	sımılar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent					
		1b	43			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine	ss rela	tionship with any other	_		
	officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other			3		No
4	Did the organization make any significant changes to its governing documents since the	•		4		No
4	, , , , , , , , , , , , , , , , , , , ,	•		5		No
5	Did the organization become aware during the year of a significant diversion of the orga	mzatio	11 5 d55et5' .			
6	Did the organization have members or stockholders?	• •		6		No
7a	Did the organization have members, stockholders, or other persons who had the power members of the governing body?	to elec	t or appoint one or more	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by		bers, stockholders, or	7b		No
	persons other than the governing body?					
8	Did the organization contemporaneously document the meetings held or written actions the following	underl	aken during the year by			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who		be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		No
Se	ection B. Policies (This Section B requests information about policies not requ	ured b	y the Internal Revenue	e Code		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the activitie and branches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its go	vernın	g body before filing the			
	form?	•		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually in	terests	that could give rise to			
	conflicts?				Yes	
С		٠		12b	-103	
	Did the organization regularly and consistently monitor and enforce compliance with the Schedule O how this was done	policy	? If "Yes," describe in	12b 12c	Yes	
13		policy	? If "Yes," describe in · · ·			
13 14	Schedule O how this was done	•	? If "Yes," describe in · · · · · · · · ·	12c	Yes	
14	Schedule O how this was done	•		12c 13	Yes Yes	
14 15	Schedule O how this was done	and ap	proval by independent	12c 13	Yes Yes	
14 15	Schedule O how this was done	and ap	proval by independent	12c 13	Yes Yes	
14 15 a	Schedule O how this was done	and ap	proval by independent	12c 13 14	Yes Yes Yes	
14 15 a	Schedule O how this was done	and ap	proval by independent	12c 13 14	Yes Yes Yes	
14 15 a b	Schedule O how this was done	and apd decises	proval by independent ion?	12c 13 14 15a 15b	Yes Yes Yes	
14 15 a b	Schedule O how this was done	and apd decises	proval by independent sion?	12c 13 14	Yes Yes Yes	No

Section C. Disclosure

17

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

in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt

- CA , CT , DC , FL , GA , IL , MD , MA , NJ , NY , NC , OH , PA , RI , SC , VA Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- lacktriangleq Own website $\ \square$ Another's website $\ \square$ Upon request $\ \square$ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 19 policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records •CATHY PETRUCCI 205 EAST 42ND STREET NEW YORK, NY 10017 (212) 251-2449 20

16b

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

BROOKLYN, NY 11215

compensation from the organization ▶ 9

Part VII

(A) Name and Title	(B) Average hours per week (list any rolland	than o	one b	oox, t an of tor/t	ot ch unle: fficei	neck mo ess pers er and a etee)	son	(D) Reportable compensation from the organization (W-		n d (W-	Estima amount of compen from	ated of other isation the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC	·) [organizat relat organiz	ted
See Addıtıonal Data Table	+	 	+	+	+	+	+			\dashv		
	+	 	+	+	 	+	+			\dashv		
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	+	 	+	+	+	+-	+			+		
1b Sub-Total	Part VII , Section	Α.				P	<u>-</u>	1,918,261		0		239,762
d Total (add lines 1b and 1c) Total number of individuals (including							o rec		100,000	<u> 'I </u>		239,102
of reportable compensation from the												
3 Did the organization list any former line 1a? If "Yes," complete Schedule 2	·		tee, k	ey e	mpl.	loyee,	or hı	ghest compensate	d employee on	3	Yes	No No
For any individual listed on line 1a, is organization and related organization	s the sum of rep	ortable							m the	<u> </u>		NO
Individual				•		·				4	Yes	
5 Did any person listed on line 1a received services rendered to the organization						•		-	ividual for	5		No
Section B. Independent Contract				_	_		_					
1 Complete this table for your five high from the organization. Report competents										mpen	nsation	
	(A) and business addre								(B) scription of services		Compe	c) nsation
ATAPE GROUP LLC	and business dec.	233							IONAL LEADERSHIP		CO.11.p. 2.	532,734
555 KAPPOCK STREET APT 26E BRONX, NY 10463 EMPOWERED BY LLC								EVENT PLA	ANNITAIC			172,800
1375 OCEAN AVE								LVLIVIII	MINIMO			172,000
BROOKLYN, NY 11230 REDSTONE STRATEGY GROUP LLC								CONSULTI	NG		 	165,000
3223 ARAPAHOE AVEN								[140			105,000
BOULDER, CO 80303 DELOITTE CONSULTING LLP					_			CONSULTI	NG			150,000
30 ROCKFELLER PLAZA												***/**
NEW YORK, NY 10112 WENDY FLEISCHER,				—	—		—	CONSULTI	NG		 	145,250
674 CARROLL ST BROOKLYN, NY 11215												•

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

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

Part	VIII (2016	Statement of	Pevenue								Page 9
ган		Check if Schedul		a respo	onse or note to a	any line in	this Part VIII				🗆
				<u> </u>			(A) revenue	(B) Related o exempt function		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Fed	derated campaig	ns	1a	21,605,81	 .9		revenue			512 - 514
nts ints		mbership dues		1b		_					
ira 10u		ndraising events		1c	2,832,72	 !7					
s, c An		ated organizatio		1d		<u></u>					
<u>a</u> ≝		vernment grants (co		1e	26,255,83						
<u>چ</u> . ≣: چ	_	other contributions	·	l re	20,233,03	-					
Contributions, Gifts, Grants and Other Similar Amounts		l sımılar amounts n		1f	3,058,04	13					
		ncash contribution ines 1a - 1f \$	ons included	60	,000						
Cont and I	h Tot	al. Add lines 1a	-1f		•		53,752,423				
٦.					Busin	ess Code	33,732,123				
Service Revenue	2a CAME	PAIGN FEES				900099	10	04,476	104,476	5	
45	_					300033					
Ce l	ь —										
ervi	q —										
n S	e —			_							
Program	f All o	ther program se	rvice revenue								
δ	g Total	I. Add lines 2a-2	?f		>	104,476	5				
		tment income (i			interest, and oth	er		1			
	sımılaı	r amounts) .				·	160,889				160,889
		ne from investm				>					
	5 Royal	ties			1	<u> </u>					
	6a Gros	s rents	(ı) Real	l	(II) Persona	_					
	b Less	rental expenses									
		tal income or									
	(loss		L								
	d Net	rental income o				>					
	asset	s amount sales of s other inventory	(ı) Securit	.24,296	(II) Other						
	othe	cost or basis and s expenses	2,0	161,599							
		or (loss)		62,697							
		gain or (loss) .			1	<u> </u>	62,697				62,697
Other Revenue	(not cont	s income from f including \$ ributions reporte Part IV, line 18	2,832,727 ed on line 1c)	of	351,	150					
Re	b Less	dırect expense	s	ь	505,	176					
er	c Net i	income or (loss)	from fundrais	sing ev	ents	<u> </u>	-154,026				-154,026
Oth		s income from g Part IV, line 19									
		direct expense		a b							
		income or (loss) is sales of invent		activit	ies •	·					
		rns and allowand		a							
	b Less	cost of goods s	sold	b							
	c Net i	income or (loss)		invent							
		Miscellaneous	Revenue		Business Cod		404.000				
	11a _{OTF}	HER INCOME			90	0099	104,823	1	104,823		
	b 4011	K FORFEITURES			90	0099	89,011		89,011		
	131	211 211 31(23									
	c BOA	RD SERVE NYC			90	0099	3,073		3,073		
	d All o	ther revenue .									
		al. Add lines 11a			•	.					
		al r evenue. See					196,907				
				- •	,		54,123,366] 3	301,383		0 69,560 Form 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	·	` ,	
Check if Schedule O contains a response or note to any	line in this Part IX .			<u> ⊔</u>
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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	41,235,269	41,235,269		
2 Grants and other assistance to domestic individuals See Part IV, line 22	349,461	349,461		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,194,167	335,674	559,192	299,301
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	5,107,185	1,789,452	1,694,765	1,622,968
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	899,364	321,598	311,228	266,538
9 Other employee benefits	104,114	41,104	20,652	42,358
10 Payroll taxes	504,565	179,189	176,636	148,740
11 Fees for services (non-employees)				
a Management				
b Legal	2,474		2,474	
c Accounting				
d Lobbying	67,000		67,000	
e Professional fundraising services See Part IV, line 17				
f Investment management fees	44,981		44,981	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,063,792	186,745	720,856	156,191
12 Advertising and promotion	679,016		800	678,216
13 Office expenses	178,612	28,108	123,277	27,227
14 Information technology	80,397	12,775	56,937	10,685
15 Royalties				
16 Occupancy	1,564,071	772,783	375,980	415,308
17 Travel	54,517	9,700	29,644	15,173
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	213,196	22,432	173,011	17,753
20 Interest	611,284	297,876	153,324	160,084
21 Payments to affiliates	1,022,158	505,355	245,216	271,587
22 Depreciation, depletion, and amortization	568,619	335,179	112,580	120,860
23 Insurance	198,894	98,333	47,715	52,846

16,593

498,410

293,904

75,355

66,871

56,694,269

5,892

36,014

5,667

46,568,606

5,809

498,410

195,753

33,848

5,650,088

4,892

62,137

35,840

66,871

4,475,575

Form **990** (2018)

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

expenses on Schedule O)

b BAD DEBT EXPENSE

e All other expenses

c EQUIP RENTALS & EXP

d DUES AND SUBSCRIPTIONS

a UBTI

Forn	า 990	(2018)					Page 11
Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			484,190	1	1,051,538
	2	Savings and temporary cash investments .		[3,147,923	2	172,251
	3	Pledges and grants receivable, net			14,752,589	3	15,024,051
	4	Accounts receivable, net		[1,822	4	
	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L		5			
Assets	7	section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	of section 501(c)(9) structions) Complete		6 7		
SS	8	Inventories for sale or use			8		
Ä	9	Prepaid expenses and deferred charges			375,774	9	351,803
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	9,992,786			
	ь	Less accumulated depreciation	10 b	2,713,105	7,779,887	10 c	7,279,681
	11	Investments—publicly traded securities .			5,432,604	11	5,780,432
	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			1,365,207	15	2,355,859
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	33,339,996	16	32,015,615
	17	Accounts payable and accrued expenses			1,525,895	17	2,241,726
	18	Grants payable			9,544,535	18	9,330,065
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Š	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21	
abilities	22	Loans and other payables to current and former key employees, highest compensated employee					
ge		persons Complete Part II of Schedule L				22	

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10,176,209

3.847.500

25.595.500

1.550.058

2,468,306 2,401,751

6,420,115

32,015,615

Form **990** (2018)

9,960,602

3,445,288

24,476,320

1.560.862

4,905,082

2,397,732

8,863,676

33,339,996

23

24

26

27 28

29

30

31

32

33 34

Net Assets or Fund Balances

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

3a

3b

No

Form 990 (2018)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990 (2018)

FOR CHILDREN

Form 990, Part III, Line 4a:

EDUCATIONATTENDANCE IMPROVEMENTUNITED WAY OF NEW YORK CITYIN PARTNERSHIP WITH THE NEW YORK CITY OFFICE OF COMMUNITY SCHOOLS (OCS) AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) IS IMPROVING THE OUTCOMES FOR STUDENTS ACROSS OUR CITY WHO ATTEND COMMUNITY SCHOOLS, BY IMPROVING ATTENDANCE AND DECREASING DROPOUT RATES. UNITED WAY SUPPORTS 45 COMMUNITY SCHOOLS (ELEMENTARY, MIDDLE, AND HIGH) TO TRANSFORM THEM INTO NEIGHBORHOOD HUBS WHERE HEALTH CARE, FOOD PANTRIES, AFTER-SCHOOL PROGRAMS, FAMILY ENGAGEMENT. AND PARENT EDUCATION CLASSES ARE AVAILABLE DIRECTLY ON SCHOOL CAMPUSES, ALL IN AN EFFORT TO HELP YOUTH REACH THE GOAL ON ON-TIME GRADUATION, AND PREPARING THEM FOR COLLEGE OR CAREER GRADE-LEVEL READINGUNITED WAY OF NEW YORK CITY'S READNYC INITIATIVE IS A COLLECTIVE IMPACT APPROACH THAT HELPS IMPROVE GRADE-LEVEL READING BY THIRD GRADE FOR CHILDREN LIVING IN SOME OF OUR MOST-CHALLENGED COMMUNITIES. WHILE AT THE SAME TIME EMPOWERING THEIR PARENTS AND CAREGIVERS TO BUILD MORE STABLE HOMES BRINGING TOGETHER, STUDENTS, PARENTS, TEACHERS, SCHOOLS, AND COMMUNITIES, WHILE OFFERING CLASSROOM RESOURCES, CULTURALLY RELEVANT CURRICULUM, TRAINING FOR TEACHERS AND PRINCIPALS, AND FAMILY SUPPORTS FOR BASIC AND EMERGENCY NEEDS, UNITED WAY OF NEW YORK CITY IS COORDINATING EVERY OBSTACLE THAT FACTORS INTO A CHILD'S ABILITY TO LEARN, AND AS A RESULT IS IMPROVING LITERACY OUTCOMES

Form 990, Part III, Line 4b: FOOD ACCESS COLLABORATIVEUNITED WAY OF NEW YORK CITY CAME TOGETHER WITH THE NEW YORK CITY MAYOR'S OFFICE OF FOOD POLICY, THE HELMSLEY CHARITABLE TRUST, CITY HARVEST, NEW YORK CITY HUMAN RESOURCES ADMINISTRATION, AND THE NEW YORK STATE DEPARTMENT OF HEALTH-HUNGER PREVENTION

AND NUTRITION ASSISTANCE PROGRAM (HPNAP) TO FORM THE NEW YORK CITY FOOD ASSISTANCE COLLABORATIVE (FAC) THE FAC WAS CREATED TO ADDRESS HUNGER, INCREASE FOOD PROVIDER CAPACITY, SHARE INFORMATION AND IMPROVE CLIENT EXPERIENCE BY HELPING TO DISTRIBUTE GROCERY ITEMSINCLUDING FRESH. HEALTHY FOODSAND PREPARE AND SERVE MEALS TO UNDERSERVED NEIGHBORHOODS, ENSURING THAT FOOD IS DISTRIBUTED WHERE THE GREATEST NEED

LIES MEMBERS OF THE FAC ARE UNIFIED IN THEIR MISSION TO DIRECT EMERGENCY FOOD RESOURCES EFFECTIVELY AND EFFICIENTLY TO NEW YORK CITY'S MOST-

MILLION POUNDS OF FOOD ANNUALLY

VULNERABLE NEIGHBORHOODS THROUGH CAPACITY BUILDING AND FOOD PANTRY SUPPORT. THE FAC WAS ABLE TO ASSIST LOCAL PANTRIES DISTRIBUTE ANOTHER 15

Form 990, Part III, Line 4c:

INITIATIVES ENSURE THAT NONPROFITS ARE STRONG AND ADAPTIVE, AND ALIGN WITH PARTNERS WHO COMMIT TO SHARED GOALS, ACTIVITIES, AND LEARNINGS

ORGANIZATIONAL CAPACITY BUILDINGUNITED WAY OF NEW YORK CITY MOBILIZES RESOURCES TO STABILIZE, STRENGTHEN, AND SUSTAIN COMMUNITY NONPROFITS TO DELIVER HIGH-OUALITY SERVICES THAT IMPROVE THE LIVES OF LOW-INCOME NEW YORKERS AND HELP THEM ACHIEVE SELF-SUFFICIENCY OUR CAPACITY BUILDING

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average compensation hours per than one box, unless compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any nours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
AMANI TOOMER DIRECTOR	1 00	×						0	0	0	
ANDREW ALFANO DIRECTOR	1 00	Х						0	0	0	
ANDREW BREGENZER DIRECTOR	1 00	X						0	0	0	

DIRECTOR						
ANDREW ALFANO	1 00	,			0	
DIRECTOR		^			0	
ANDREW BREGENZER	1 00	×			0	
DIRECTOR		,			9	
ANISH MELWANI	1 00				9	
DIRECTOR		^				

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and Independent Contractors

BERNICE CLARK

BRAD A ROTHBAUM

BRENDAN DOUGHER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

CHARLES WANG

CHRISTINE FENSKE

CHRISTOPHER JAMES

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any nours	and	a dir	ecto	or/tr	ustee,)	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DAVID HW TURNER DIRECTOR	1 00	×						0	0	0
DENISE PICKETT DIRECTOR & VICE CHAIR	1 00	x		x				0	0	0
DIPTI S GULATI DIRECTOR	1 00	×						0	0	0

0

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0

0

DENISE PICKETT	1 00	×	x		0	
DIRECTOR & VICE CHAIR		^	^			
DIPTI S GULATI	1 00	×			0	
DIRECTOR					9	
DONALD DONAHUE	1 00	l	V		0	
DIRECTOR & CO-CHAIR		_ ^			0	

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and Independent Contractors

FELIX MATOS RODRIGUEZ

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ISIDORE MAYROCK

J EMILLO CARILLO

JEFFREY SHERMAN

JENNIFER PIEPSZAK

JEAN-CLAUDE GRUFFAT

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LARRY KLANE

LISA CARNOY

LORRAINE M LYNCH

MARIANNA D COOPER

MICHEAL SCHMIDTBERGER

DIRECTOR & CO-CHAIR

.....

	any hours		a dır	ecto	or/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JENNIFER WARREN DIRECTOR	1 00	×						0	0	0	
JOSEPH CABRERA DIRECTOR & VICE-CHAIR	1 00	×		х				0	0	0	
JOSHUA B MASON DIRECTOR	1 00	х						0	0	0	
KARYN L TWARONITE	1 00										

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DIRECTOR & VICE-CHAIR						J	
JOSHUA B MASON	1 00	\ _{\ \}				0	
DIRECTOR		_ ^					
KARYN L TWARONITE	1 00	l ↓				9	
DIRECTOR		_ ^					
KEVIN STONE	1 00						

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(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours	and	a dır	recto	or/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
NEIL MASTERSON DIRECTOR	1 00	×						0	0	0	
REV DR EMMA JORDAN-SIMPSON DIRECTOR	1 00	х						0	0	0	
ROBERT FRIEDMAN DIRECTOR & TREASURER	1 00	X		х				0	0	0	
ROBERT MULLEN DIRECTOR	1 00	×						0	0	0	

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DIRECTOR & TREASURER	
ROBERT MULLEN	1 00
DIRECTOR	
ROBYN ZIVIC	1 00
DIRECTOR	
ROSSIE EMMITT TURMAN III	1 00

DIRECTOR

DIRECTOR

DIRECTOR

STEVEN CHOI

SUSAN BURDEN

TED MOUDIS

DIRECTOR

STEPGEN J DANNHAUSER

DIRECTOR & SECRETARY

.....

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

(W-2/1099-

408,246

222,177

218,375

135,506

204,935

(W- 2/1099-

organization and

38,886

27,428

6,525

33,116

21,447

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for related

45 00

20 00

45 00

45 00

35 00

45 00

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	`MISC)	`MISC)	related organizations
TODD SCHWARTZ DIRECTOR	1 00	X						0	0	0
TRACY GAVEN-BRIDGMAN DIRECTOR	1 00	×						0	0	0
TROY YOUNG DIRECTOR	1 00	Х						0	0	0
GINA GOODENOW	45 00			х				251,024	0	42,333

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DIRECTOR
GINA GOODENOW
SVP, CFO (OUTGOING)
SHEENA WRIGHT
PRESIDENT, CEO

TOM GUILTINAN

TEMPORARY CFO

CATHY PETRUCCI

MEGHAN BROWN

AVP, ASST CONTROLLER

SVP, CHIEF DEVELOP OFFICER

JACQUELINE JENKINS

......

SVP, CHIEF TRANSF OFFICER

LESLEIGH IRISH-UNDERWOOD

VP, CHIEF MARKETING OFF

and Independent Contractors

and Independent Contractors (A) Name and Title

MICHELLE MATHESON

VICTOR MILLSAP

WALLACE BACHMAN

VP, EXPERIENTIAL MARKETING

VP, INFORMATION TECHNOLOGY

SENIOR VP. CHIEF TALENT OF

any hours for related organizations below dotted line)
35 00
45 00
 ••••••

(B)

Average

hours per

week (list

45 00

.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Institutio

(C)

Position (do not check more

than one box, unless person is both an officer and a director/trustee) t compens

Former

Reportable compensation from the organization (W- 2/1099-MISC) 147,162 144.344 186,492

(D)

(E)

Reportable

compensation

from related

organizations

(W- 2/1099-

MISC)

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

17,631

31,194

21,202

SCHEDU Form 990 o 90EZ)		Com		Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2018
Department of the			► Go to	www.irs.gov/Form			•	Open to Public Inspection
lame of the	organizat	ion CITY					Employer identifi	cation number
	.	- 5	o	- (011 1	11-	1 - 1 1 > 6	13-2617681	
				us (All organization e it is (For lines 1 thro			see instructions.	
_		•		ssociation of churches			(A)(i).	
 2	school des	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
 3	hospital o	r a cooperati	ve hospital ser	vice organization desci	ribed in section	170(b)(1)(A)(iii).	
	medical re ame, city,		nızatıon operat	ed in conjunction with	a hospital descr	ibed in section :	170(b)(1)(A)(iii). E	Enter the hospital's
		tion operated i v). (Comple		it of a college or unive	rsity owned or o	perated by a gov	ernmental unit descr	ibed in section 170
•	,, ,, ,,		,	r governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
S	ection 17	O(b)(1)(A)((vi). (Complete			-	ınıt or from the gene	ral public described in
8	communit	y trust descr	ibed in sectio i	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
				escribed in 170(b)(1) See instructions Enter				lege or university or
fr In	om activiti ivestment	es related to income and i	ıts exempt fur unrelated busır	(1) more than 331/3% nctions—subject to cer ness taxable income (le omplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
	•			d exclusively to test fo	r public safety S	See section 509	(a)(4).	
	nore public	y supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(
a	ype I. A si rganizatior	upporting org	ganızatıon opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
	nanagemer	t of the supp		pervised or controlled in ation vested in the sar and C.				
		•	_	supporting organizations) You must com		·	, -	ated with, its
d 🗌 T	ype III no inctionally	n-function integrated	ally integrate The organization	ed. A supporting organi in generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orga	
e □ c	heck this b	ox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type I	II functionally
	-		on-functionally organizations	ıntegrated supporting	organization			
			-	upported organization(s)			
	Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions)) Yes No							(vi) Amount of other support (see instructions)
otal								
	rk Reduct	ion Act Not	ice, see the I	nstructions for	Cat No 1128!	5F :	Schedule A (Form 9	990 or 990-EZ) 201

(Complete only if you checked the box on line 5, 7, 8, or 9 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 (e) 2018 (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 56,497,449 61,875,439 61,565,929 59,973,152 53,841,613 293,753,582 membership fees received (Do not include any "unusual grant") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities

furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 56,497,449 61,875,439 61,565,929 59,973,152 53,841,613 293,753,582 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 Public support. Subtract line 5

from line 4 Section B. Total Support Calendar year (a)2014 **(b)**2015 (c)2016 (d)2017 (e)2018 (or fiscal year beginning in) ▶ Amounts from line 4 56,497,449 61,875,439 61,565,929 59,973,152 53,841,613

293,753,582 (f)Total Gross income from interest. dividends, payments received on 289,055 267,684 243,748 223,586 securities loans, rents, royalties 148,135 and income from similar sources

293,753,582 1,172,208 Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital 404,410 521,616 843,249 470,844 548,057 2,788,176 assets (Explain in Part VI) **Total support.** Add lines 7 through

10 11 297,713,966 12 Gross receipts from related activities, etc. (see instructions) 12 1,148,334 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, Section C. Computation of Public Support Percentage 14 98 670 %

15

98 730 % and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2017 Schedule A, Part II, line 14 16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ▶□ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2018. 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 h 10%-facts-and-circumstances test—2017. 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

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 Gross receipts from activities that are						
3	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 The value of services or facilities						
5	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)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(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							
	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	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi	<u>_</u>				1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,(• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
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	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		103	-140
		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		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	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	3h		

Sched	ule A (Form 990 or 990-EZ) 2018			Page 6						
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	izations							
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)	1								
a	Average monthly value of securities	1a								
b	Average monthly cash balances	1 b								
С	Fair market value of other non-exempt-use assets	1c								
d	Total (add lines 1a, 1b, and 1c)	1d								
е	Discount claimed for blockage or other factors (explain in detail in Part VI)									
2	Acquisition indebtedness applicable to non-exempt use assets	2								
3	Subtract line 2 from line 1d	3								
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4								
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5								
6	Multiply line 5 by 035	6								
7	Recoveries of prior-year distributions	7								
8	Minimum Asset Amount (add line 7 to line 6)	8								
	Section C - Distributable Amount			Current Year						
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1								
2	Enter 85% of line 1	2								
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3								
4	Enter greater of line 2 or line 3	4								
5	Income tax imposed in prior year	5								
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6								
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,						

Schedule A (Form 990 or 990-EZ) (2018)

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12. Part IV. Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D. lines 5, 6, and 8, and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation OTHER REVENUE - 2015 AMOUNT \$ 67,649 2016 AMOUNT \$ 366,362 2017 AMOUNT \$ 49,284 2018 SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER AMOUNT \$ 193,834 FUNDRAISING INCOME - 2014 AMOUNT \$ 404,410 2015 AMOUNT \$ 453,967 2 INCOME 016 AMOUNT \$ 476,887 2017 AMOUNT \$ 421,560 2018 AMOUNT \$ 351,150 BOARD SERVE NYC - 2

018 AMOUNT \$ 3.073

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493141005090

Open to Public

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

EZ)

(Form 990 or 990-

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

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

Inspection

f the S f the S f the	Section 527 organizations Complet organization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 9: have filed Form 5768 (election under s have NOT filed Form 5768 (election un Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, Iir ection 501(h)) Co der section 501(h	ne 47 (Lobbying) Implete Part II-A)) Complete Part	Actıvit Do not II-B D	i es), comp	olete Part II-l : complete Pa	art II-A
Nan	ne of the organization TED WAY OF NEW YORK CITY			Emplo	yer id	entif	ication nun	nber
UNI	TED WAT OF NEW TORK CITY			13-26	17681			
Pari	I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is	a section 527	orga	niza	tion.	
1	Provide a description of the organ "political campaign activities")	ızatıon's dırect and ındırect political can	npaign activities in	n Part IV (see inst	ruction	s for	definition of	
2	Political campaign activity expend	itures (see instructions)			>	\$_		
3	Volunteer hours for political camp							
Par	I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise to	x incurred by the organization under se	ction 4955		>	\$_		
2	<i>'</i>	ıx ıncurred by organization managers ur			>	\$_		
3	If the organization incurred a sect	cion 4955 tax, did it file Form 4720 for t	his year?				☐ Yes	☐ No
4a	Was a correction made?						☐ Yes	□ No
b Pari	If "Yes," describe in Part IV I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 50	1(c)(:	3).		
1	<u> </u>	ed by the filing organization for section			<u> </u>			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$							
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	line 17b	>	\$		
4	Did the filing organization file For	m 1120-POL for this year?				`-	☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivers see (PAC) If additional space is needed,	unt paid from the ed to a separate p	filing organizatio olitical organizatio	n's fun	ds Al	lso enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiza funds If none -0-	ation's		(e) Amount contributions and promp directly deliv separate proganization enter	received otly and vered to a political If none,
1								
2								
3								
4								
5								
6								

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

(a) 2015

1,000,000

88,044

250,000

(b) 2016

1,000,000

101,250

250,000

(c) 2017

1,000,000

90.200

250,000

90,200

(d) 2018

1,000,000

67,000

250,000

67,000 Schedule C (Form 990 or 990-EZ) 2018

(e) Total

4,000,000

6,000,000

346,494

1,000,000

1,500,000

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

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

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

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

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

activity

Volunteers?

Part IV

Return Reference

1

(b)

Amount

(a)

No

Yes

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

5

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Supplemental Financial Statements

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

DLN: 93493141005090 OMB No 1545-0047

> Open to Public Inspection

Schedule D (Form 990) 2018

Department of the Treasury Internal Revenue Service

(Form 990)

8

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

Name of the organization **Employer identification number** UNITED WAY OF NEW YORK CITY 13-2617681 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 935,000 Aggregate value of grants from (during year) 911.579 Aggregate value at end of year 1.070.389 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ✓ Yes □ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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. 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 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D

Par	ŧ 1111	Organizations Ma	aintaining Col	lections of Art,	Histori	ical T	reas	ures, or	Other:	<u>Similar A</u>	ssets (continued,)
3	Usıng ıtems	the organization's acq (check all that apply)	uisition, accessior	n, and other records	s, check	any of	the fo	ollowing th	at are a	significant	use of its	collection	ı
а		Public exhibition			d		Loar	n or excha	nge prog	rams			
b		Scholarly research			е		Othe	er					
c		Preservation for future	generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5		g the year, did the orga s to be sold to raise fur								ılar	☐ Ye	s 🗆	No
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			orm 990), Part	IV, I	line 9, or	reporte	d an amo	unt on F	orm 990	, Part
1a		e organization an agent led on Form 990, Part)		an or other interme	diary for	contri	bution	ns or other	r assets r	not	☐ Ye	s 🗸	No
ь	If "Ye	es," explain the arrange	ment ın Part XIII	and complete the f	ollowing	table		Γ			mount		
c	Begin	ning balance							1c				
d	Addıtı	ions during the year							1 d				
е	Distri	butions during the year	-						1e				
f	Endın	g balance							1f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X, line	21, for	escrov	vorc	ustodial ac	count lia	bility?	☐ Ye	s 🗆	No
b		s," explain the arrange									_		
Pa	rt V	Endowment Fund											
			·	(a)Current year	(b) P	rıor yea	r	(c)Two yea	ars back	(d)Three ye	ars back	(e)Four ye	ars back
1 a	Beginn	ing of year balance .		2,397,733		2,378	3,134	2	2,326,943	3	,326,004		3,256,414
b	Contrib	outions											94,590
c	Net inv	estment earnings, gair	ns, and losses	145,483		19	9,599		51,191		-999,061		-25,000
d	Grants	or scholarships											
е		expenditures for facilitie ograms	es	479,636									
f	Admını	strative expenses .											
g	End of	year balance		2,063,580		2,39	7,733	2	2,378,134	2	,326,943		3,326,004
2	Provid	de the estimated percei	ntage of the curre	ent year end balanc	e (line 1	g, colu	mn (a	a)) held as					
а	Board	d designated or quasi-e	ndowment 🟲										
b	Permanent endowment ► 100 000 %												
С	Temp	orarily restricted endov	vment 🟲										
	The p	ercentages on lines 2a,	, 2b, and 2c shou	ld equal 100%									
3a		nere endowment funds	not in the posses	sion of the organiza	ation tha	t are h	eld ar	nd adminis	tered for	the		14	
	-	nization by prelated organizations									2	Yes a(i)	No No
		elated organizations .				•		• •				i(ii)	No
Ь		s" on 3a(II), are the rel			on Sche	dule R	? .	• •				3b	+
4		ribe in Part XIII the inte	-	•									
Pa	rt VI	Land, Buildings,	and Equipmer	nt.									
		Complete if the or											
	Descri	ption of property	(a) Cost or oth (investme	1 , ,	t or other	basis (other)	(c) Accu	mulated d	epreciation	(d) Book va	lue
1 a	Land												
b	Buildin	gs											
c	Leaseh	old improvements				8,5	04,667	7		2,026,185			6,478,482
d	Equipm	nent				1,4	88,119	9		686,920			801,199
	Other	ı											
Tota	al. Add	lines 1a through 1e (Co	olumn (d) must ed	qual Form 990, Part	X, colui	mn (B)	, line	10(c)).	. 1	>			7,279,681

See Form 990, Part X, line 12.		vered "Yes" on Form 990, Part IV, line 11b.
(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		
A)		
В)		
C)		
D)		
E)		
F)		
G)		
н)		
otal. (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, lı	ne 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 Fi	orm 990, Pa	rt IV, line 11d See Form 990, Part X, line 15 (b) Book value
1) BENEFICIAL INTEREST IN PERPETUAL TRUST		53
2) CACH CURRENDER MALUE INCURANCE		1 00
,		86
3) RESTRICTED CASH		95
3) RESTRICTED CASH 4)		
3) RESTRICTED CASH 4) 5)		
3) RESTRICTED CASH 4) 5) 6)		
3) RESTRICTED CASH 4) 5) 6) 7)		
3) RESTRICTED CASH 4) 5) 6) 7)		
3) RESTRICTED CASH 4) 5) 6) 7) 8)		95
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f.
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability	'Yes' on Fo	▶ 2,35
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes	'Yes' on Fo	95
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE	'Yes' on Fo	95
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE ENSION AND POSTRETIREMENT OBLIGATION	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE ENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT	'Yes' on Fo	95
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE ENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT 4)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE DENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT 4) 5)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
3) RESTRICTED CASH 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE DENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT 4) 5) 6)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25.	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
3) RESTRICTED CASH 4) 5) 6) 6) 77) 8) 99 Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE PENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT 4) 5) 6) 6) 77)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782
3) RESTRICTED CASH 4) 5) 6) 6) 77) 8) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes CAMPAIGN DONOR DESIGNATIONS PAYABLE PENSION AND POSTRETIREMENT OBLIGATION DEFERRED RENT 4) 5) 6) 6) 7)	'Yes' on Fo	▶ 2,35 rm 990, Part IV, line 11e or 11f. ook value 315,820 2,879,782

Part XI

2

5

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2018

Page 4

-15,247,688 54,078,385

44,981

54,123,366

41,179,555

42,000

41,137,555

15,556,714

56.694.269

Schedule D (Form 990) 2018

Add lines 4a and 4b .

Add lines 2a through 2d .

Return Reference

b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII)
е	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${\bf 1}$

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

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

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

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Total expenses and losses per audited financial statements

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Subtract line 2e from line 1

Supplemental Information

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

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

2a

2b

2c 2d

4a

4b

2a

2b

2c

2d

4a

4b

Explanation

-15,511,733	
	2e
	3
44,981	

4c

2e

3

4c

5

222.045

42.000

42,000

44,981 15,511,733

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Name: UNITED WAY OF NEW YORK CITY

PART V, LINE 4

Supplemental Information Return Reference

Explanation

EIN: 13-2617681

Software Version:

Software ID:

SOURCE OF INCOME

THE ORGANIZATION'S ENDOWMENT FUNDS ARE PRIMARILY USED IN PERPETUITY TO PROVIDE A PERMANENT

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	UWNYC BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2019 AND 2018 IN ACCORDANC E WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	DONOR DESIGNATIONS -14,946,452 PROVISION FOR BAD DEBT -498,410 INDIRECT FUNDRASING EXPENSES -66,871

Supplemental Information Return Reference Explanation PART XII, LINE 4B - OTHER INDIRECT FUNDRASING EXPENSES 66,871 DONOR DESIGNATIONS 14,946,452 PROVISION FOR BAD DEBT 498,410 I ADJUSTMENTS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Department of the Treasury

Internal Revenue Service

DLN: 93493141005090

OMB No 1545-0047

SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

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

organization entered more than \$15,000 on Form 990-EZ, line 6a

Open to Public

Inspection

Name of the organization **Employer identification number** UNITED WAY OF NEW YORK CITY Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes
☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (iii) Did (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) (or retained by) (or retained by) from activity custody or fundraiser listed in organization control of col (i) contributions? Yes No GRIDIRON GALA SMK EVENT SOLUTIONS LLC 1441 BROADWAY SUITE 5001 Yes 2,083,659 100,000 1,983,659 NEW YORK, NY 10018 WOMENS UNITED LUNCHEON GLOW GLOBAL EVENTS 575 5TH AVE 14TH FLOOR Yes 1,100,218 79,573 1,020,645 NEW YORK, NY 10017 3,183,877 179,573 Total 3,004,304

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

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

licensing

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	5?		☐ Yes	□Ne	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	nization's gaming/special events books and ri	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		anization ▶ \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		ated to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explanat	rions required by Part I, line 2b, column licable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493141005090 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number UNITED WAY OF NEW YORK CITY 13-2617681 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government 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) 2018

HOW THE AGENCY INTENDS TO SPEND THE CONTRACT AWARD AND AN EXPENDITURE REPORT TO SUBSTANTIATE THE AMOUNT REQUESTED FOR PAYMENT. UWNYC ALSO REQUIRES AND REVIEWS AGENCIES' PROGRAMMATIC DATA AND ACCOMPLISHMENTS FINALLY, UWNYC CONDUCTS PROGRAMMATIC REVIEWS AT THE

SOME GRANTS ON SCHEDULE I WERE MADE TO ENTITIES THAT PROVIDE SERVICES TO NONPROFIT ORGANIZATIONS, WHICH ARE THE ULTIMATE BENEFICIARIES OF THE PROGRAM THESE ENTITIES ARE ANAT GERSTEIN INC , ATAPE GROUP, LLC, BALER SALES COMPANY, INC , BENTZ'S FOOD PRODUCTS, INC , CDW DIRECT, LLC, CODERO HOSTING, CRANBERRY HALL FARM, CURTIS WARD REFRRIGERATION CORP, DAVID ELLIOT POULTRY FARM, INC., DRISCOLL FOODS, FRONT STREAM LLC, GONZALEZ FARM, HEARTY ROOTS FARM, HOUGHTON MIFFLIN HARCOURT PUBLISHING COMPANY, HUMAN ELEMENT LLC, RED APPLE FRUIT AND VEGETABLE, REDSTONE STRATEGY GROUP LLC, RESTRAUNT SUPPLY LLC, SHABBOS FISH MARKET CORP, SINGER NY LLC, THE FARM AT MILLER'S CROSSING, YVETTE JACKSON

Page **2**

Schedule I (Form 990) 2018

(6) (7)

PROGRAM SITES AND PROVIDE FEEDBACK

LLC, AND ZAP CONSULTANT LLC

Schedule I (Form 990) 2018

SCHEDULE I, PART II

Software ID: **Software Version:**

EIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFTER SCHOOL ALL STARS OF NYC 8000 UTOPIA PKWY JAMAICA, NY 11439	11-3306766	501(C)(3)	435,364				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
ANAT GERSTEININC 108-18 QUEENS BLVD FORESTHILLS, NY 11375	80-0609476		100,000				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI- DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ARIVA INC 32-0028598 501(C)(3) 7,500 READNYC- READNYC IS 69 EAST 167TH STREET 2ND A COMPREHENSIVE, FLOOR ALIGNED, AND BRONX, NY 10452 COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE 515.650 READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY

TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT. CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ATAPE GROUP LLC 555 KAPPOCK STREET BRONX, NY 10463	46-1739670	

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BALTER SALES COMPANY INC 209 BOWERY NEW YORK, NY 10002	13-1911598		115,497				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
BEDFORD-STUYVESANT RESTORATION CORP 1368 FULTON STREET BROOKLYN, NY 11216	11-6083182	501(C)(3)	127,130				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI- DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (c) IRC section (h) Purpose of grant (book, FMV, appraisal, if applicable organization grant cash non-cash assistance or assistance or government assistance other) BENZ'S FOOD PRODUCTS 11-2841450 39,988 HUNGER PREVENTION INCORPORATED NUTRITION 332 ALBANY AVENUE ASSISTANCE PROGRAM BROOKLYN, NY 11213 (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND HEALTH EDUCATION** EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES **BIG HUMAN** 27-3785980 501(C)(3) 24,000 HUNGER PREVENTION 51 E 12 STREET NUTRITION ASSISTANCE PROGRAM

(HPNAP) - HPNAP HELPS

ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND** HEALTH EDUCATION EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND **NUTRITION ISSUES**

NEW YORK, NY 10003

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(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		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOOMHEALTH 540 EAST FORDAM ROAD BRONX, NY 10458	13-3599121	501(C)(3)	5,275				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
BRONXWORKS 60 EAST TREMONT AVE BRONX, NY 10453	13-3254484	501(C)(3)	690,650				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	o Domestic Organiza	tions and Domest	ic Governments.		
(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		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMBA 1720 CHURCH AVENUE 2ND FL BROOKLYN, NY 11226	11-2480339	501(C)(3)	285,148				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
CATHOLIC CHARITIES COMMUNITY SERVICES ARCHDIOCESE OF NY 1011 FIRST AVENUE NEW YORK, NY 10022	13-5562184	501(C)(3)	478,893				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	ာ Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CDW DIRECT LLC 300 N MILWAUKEE AVE VERNONHILLS, IL 60061	36-3310735		15,282				FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
CENTER FOR SUPPORTIVE SCHOOLS 461 GRAND STREET BROOKLYN, NY 11211	22-2962532	501(C)(3)	287,491				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, if applicable grant non-cash assistance organization cash or assistance or government assistance other) CHINESE-AMERICAN 13-6202692 501(C)(3) 69,882 FOOD SUPPORT PLANNING COUNCIL INC CONNECT (FSC) -FSC 150 ELIZABETH ST FACILITATES AND NEW YORK, NY 10012 IMPROVES NYC RESIDENTS ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH **SPECIALIZED** COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL **ELIGIBILITY** 13-2892297 501(C)(3) 17,216 HUNGER PREVENTION APSTLES SOUP KITCHEN NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND

AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND** HEALTH EDUCATION EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHURCH OF THE HOLY APSTLES SOUP KITCHE 296 NINTH AVE NEW YORK, NY 10001

(b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (a) Name and address of (g) Description of ıf applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CITY HARVEST 13-3170676 501(C)(3) 105.000 FOOD ASSISTANCE 6 E 32ND ST COLLABORATIVE - THE NEW YORK, NY 10016 FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES 13-3556132 501(C)(3) 50,000 FOOD SUPPORT

CONNECT (FSC) -FSC

COMPUTER SOFTWARE
CREATED BY UNITED
WAY OF NEW YORK
CITY TO INCREASE
AWARENESS, AND
WORK WITH
INDIVIDUALS TO
DETERMINE POTENTIAL

FACILITATES AND

IMPROVES NYC
RESIDENTS ACCESS TO
SNAP BENEFITS BY
CONDUCTING
GRASSROOTS
OUTREACH WITH
SPECIALIZED

ELIGIBILITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COMMUNITY HEALTH ACTION OF STATEN ISLAND INC 56 BAY STREET STATENISLAND, NY 10301

(b) EIN (d) Amount of cash (f) Method of valuation (a) Name and address of (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant if applicable organization (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) COMMUNITY HELP IN PARK 11-2449994 501(C)(3) 8,000 FOOD ASSISTANCE SLOPE INC COLLABORATIVE - THE 200 FOURTH AVENUE FAC EXISTS FOR THE BROOKLYN, NY 11217 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD NETWORK IN NEW** YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COMMUNITY RESOURCE 13-3048638 501(C)(3) 193,777 FOOD ASSISTANCE EXCHANGE CORP COLLABORATIVE - THE FAC EXISTS FOR THE 42 BROADWAY 20TH FL NEW YORK, NY 10004 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL **RESOURCES**

(g) Description of (b) EIN (d) Amount of cash (h) Purpose of grant (a) Name and address of (c) IRC section (e) Amount of non-(f) Method of valuation ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) CORNERSTONE SDA CHURCH 54-2119564 501(C)(3) 44,741 FOOD ASSISTANCE 138 PENNSYLVANIA AVE COLLABORATIVE - THE BROOKLYN, NY 11207 FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD NETWORK IN NEW** YORK CITY THIS IS **ACCOMPLISHED** PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES HUNGER PREVENTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CRANBERRY HALL FARM 22-2897065 76,128 PO BOX 227 NUTRITION COOKSTOWN, NJ 08551 ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST **VULNERABLE** COMMUNITIES. SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND

NUTRITION ISSUES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CURTIS WARD REFRIGERATION CORP 217-44A 98TH AVENUE QUEENSVILLAGE, NY 11429	22-2897065		23,836				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION 1633 CENTRE ST BROOKLYN, NY 11208	11-2683663	501(C)(3)	442,875				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (c) IRC section (h) Purpose of grant (book, FMV, appraisal, if applicable organization grant cash non-cash assistance or assistance or government assistance other) DAVID ELLIOT POULTRY FARM 24-0835679 36,383 HUNGER PREVENTION 300 BRECK STREET NUTRITION SCRANTON, PA 18505 ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND HEALTH EDUCATION** EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES DRISCOLL FOODS 22-3482240 3,354,464 HUNGER PREVENTION 174 DELAWANNA AVENUE NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST **VULNERABLE**

COMMUNITIES,
SUPPORTS
COMPREHENSIVE
NUTRITION AND
HEALTH EDUCATION
EFFORTS, MONITORS
NEED AND ISSUES
RELATED TO FOOD
SECURITY, AND
PARTNERS WITH OTHER
EMERGENCY FOOD
PROVIDERS ON FOOD
SECURITY AND
NUTRITION ISSUES

DRISCOLL FOODS 174 DELAWANNA AVENI CLIFTON, NJ 07014

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST SIDE HOUSE SETTLEMENT INC 337 ALEXANDER AVE BRONX, NY 10454	13-1623989	501(C)(3)	1,819,588				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
EL-PUENTE 211 SOUTH 4TH STREET BROOKLYN, NY 11211	11-2614265	501(C)(3)	362,460				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Description of (h) Purpose of grant (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) ESKOLTA SCHOOL RESEACH 46-1946122 501(C)(3) 24,000 READNYC- READNYC IS A COMPREHENSIVE, AND DESIGN INC 50 BROAD STREET STE 615 ALIGNED, AND NEW YORK, NY 10004 COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE FAMILY HEALTH 23-7413005 501(C)(3) 586,359 ATTENDANCE INTERNATIONAL IMPROVEMENT 71 5TH AVENUE DROPOUT PREVENTION NEW YORK, NY 10003 SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN **NEW YORK CITYS** LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE

SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(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		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRONT STREAM LLC 11480 COMMERCE PARK DR STE 300 RESTON, VA 20191	38-3913855		14,946,452				DONORS MAKE A CONTRIBUTION TO UNITED WAY OF NYC BUT DESIGNATES PART OR ALL OF THE CONTRIBUTION TO ANOTHER NOT-FOR PROFIT THE FUNDS GO TO THE THIRD PARTY VENDOR, FRONT STREAM LLC, AND THEY TURN THE MONEY AROUND AND PAY OUT IT OUT UNITED WAY OF NYC RECEIVES THEIR PORTION ONLY THE REMAINING FUNDS IS PAID OUT DIRECTLY TO THE NOT-FOR PROFIT THAT WAS CHOSEN BY THE DONOR (UNITED WAY OF NYC NEVER SEES THOSE FUNDS)
GLOBAL KIDS INC 137 EAST 25TH STREET 2ND FLOOR NEW YORK, NY 10010	13-3629485	501(C)(3)	851,703				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
GONZALEZ FARM 12 LINCOLN STREET MIDDLETOWN, NY 10940	85-6928300		11,880				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES	
GOOD OLD LOWER EAST SIDE (GOLES) 173 AVENUE B NEW YORK, NY 10009	13-2915659	501(C)(3)	200,000				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI- DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS	

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE 9TH FL NEW YORK, NY 10001	13-5598710	501(C)(3)	973,134				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
GRAND STREET SETTLEMENT 80 PITT STREET NEW YORK, NY 10002	13-5562230	501(C)(3)	423,174				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (c) IRC section (g) Description of (h) Purpose of grant (book, FMV, appraisal, if applicable organization grant cash non-cash assistance or assistance or government assistance other) GROWNYC 13-2765465 501(C)(3) 59,180 HUNGER PREVENTION 51 CHAMERS STREET ROOM NUTRITION 228 ASSISTANCE PROGRAM NEW YORK, NY 10007 (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND HEALTH EDUCATION** EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES 20-2925491 93,240 HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE,

NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND** HEALTH EDUCATION EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND **NUTRITION ISSUES**

HEARTY ROOTS FARM POBOX 277 TIVOLI, NY 12583

organization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) HEAVENLY VISION CHRISTIAN 13-3706003 501(C)(3) 24,237 FOOD ASSISTANCE CENTER COLLABORATIVE - THE 2868 JEROME AVENUE FAC EXISTS FOR THE BRONX, NY 10461 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD NETWORK IN NEW** YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO ON-PROFITS IN NEED F INFRASTRUCTURAL **ESOURCES**

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES

					CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
HOLY NAME OF JESUS- ST GREGORY THE GREAT PARISH 207 WEST 96TH ST NEW YORK, NY 10025	81-2699412	501(C)(3)	12,826		FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

(a) Name and address of

(a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (c) IRC section (a) Description of organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HOUGHTON MIFFLIN 80-0277046 5.700 READNYC- READNYC IS HARCOURT PUBLISHING A COMPREHENSIVE, COMPANY ALIGNED, AND 222 BERKELEY STREET COLLECTIVE STRATEGY BOSTON, MA 021163764 TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE HUMAN ELEMENT LLC 30-0883639 12.545 FOOD ASSISTANCE 1625 WYATTS RIDGE COLLABORATIVE - THE FAC EXISTS FOR THE

PURPOSE OF
INCREASING EQUITY
AND EFFICIENCY
ACROSS THE
EMERGENCY FOOD
NETWORK IN NEW
YORK CITY THIS IS
ACCOMPLISHED
PRIMARILY THROUGH
THE PROVISION OF
ADDITIONAL FOOD IN

HIGHLY

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

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CROWNSVILLE, MD 21032

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, if applicable non-cash assistance organization grant cash or assistance or government assistance other) HUNGER FREE AMERICA 13-3471350 501(C)(3) 149,998 FOOD SUPPORT 16 BEAVER ST 3RD FLOOR CONNECT (FSC) -FSC NEW YORK, NY 10004 FACILITATES AND IMPROVES NYC RESIDENTS ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH **SPECIALIZED** COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL **ELIGIBILITY** INTERNATION RESCUE 13-5660870 501(C)(3) 17,760 HUNGER PREVENTION COMMITTEE NUTRITION ASSISTANCE PROGRAM 263 WEST 38TH STREET 6TH FLOOR (HPNAP) - HPNAP HELPS NEW YORK, NY 10018 ENSURE THE ACCESSIBILITY AND

AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND** HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

INTERNATION RESCUE COMMITTEE 263 WEST 38TH STREE FLOOR NEW YORK, NY 10018

organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) INWOOD HOUSE 13-5562254 501(C)(3) 6.800 READNYC- READNYC IS 320 EAST 82ND STREET A COMPREHENSIVE, NEW YORK, NY 10028 ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE JAMAICA BENEVOLENT ARM & 41-2268299 501(C)(3) 12,050 FOOD ASSISTANCE CULTURAL CENTER COLLABORATIVE - THE 4440 HILL AVENUE FAC EXISTS FOR THE PURPOSE OF

(e) Amount of non-

(f) Method of valuation

(h) Purpose of grant

INCREASING EQUITY
AND EFFICIENCY
ACROSS THE
EMERGENCY FOOD
NETWORK IN NEW
YORK CITY THIS IS
ACCOMPLISHED
PRIMARILY THROUGH
THE PROVISION OF
ADDITIONAL FOOD IN

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

HIGHLY

(a) Description of

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(d) Amount of cash

JAMAICA BENEVOLENT AI CULTURAL CENTER 4440 HILL AVENUE BRONX, NY 10466

(a) Name and address of

(b) EIN

(b) EIN (d) Amount of cash (f) Method of valuation (a) Name and address of (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant ıf applicable organization (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) JAN HUS PRESBYTERIAN 13-1635255 501(C)(3) 60,000 FOOD ASSISTANCE CHURCH COLLABORATIVE - THE 351 E 74TH STREET FAC EXISTS FOR THE NEW YORK, NY 10021 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD NETWORK IN NEW** YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES JEWISH COMMUNITY COUNCIL 11-2608645 501(C)(3) 11,114 FOOD ASSISTANCE OF CANARSTE COLLABORATIVE - THE 1170 PENNSYLVANIA AVE STE FAC EXISTS FOR THE PURPOSE OF BROOKLYN, NY 11239 INCREASING EQUITY AND EFFICIENCY

ACROSS THE
EMERGENCY FOOD
NETWORK IN NEW
YORK CITY THIS IS
ACCOMPLISHED
PRIMARILY THROUGH
THE PROVISION OF
ADDITIONAL FOOD IN

HIGHLY

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

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JEWISH COMMUNITY COUNCIL
OF CANARSIE
1170 PENNSYLVANIA AVE STE
B
BROOKLYN, NY 11239

if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) LIFT-NY 52-2168409 501(C)(3) 7,500 READNYC- READNYC IS 349 E 149TH STREET 500 A COMPREHENSIVE, BRONX, NY 10451 ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

LORI DAVIS CONSULTING INC 188 WEST 135TH STREET SUITE 4E A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A BUILD AND SUSTAIN A

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LOWER EAST SIDE GIRLS CLUB 56 E 1ST STREET NEW YORK, NY 10003	13-3942063	501(C)(3)	17,846				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES	
MAKE THE ROAD NY 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)(3)	947,929				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES CHANGE CAPITAL FUND - CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT SERVICES CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAP	

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASBIA OF QUEENS 6808 QUEENS BLVD REGOPARK, NY 11374	20-1923521	501(C)(3)	14,975				FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
MDRC 16 E 34TH STREET NEW YORK, NY 10016	23-7379473	501(C)(3)	165,456				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI- DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

organization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) NATIONAL COUNCIL JEWISH 13-1624132 501(C)(3) 28,571 FOOD ASSISTANCE WOMEN COLLABORATIVE - THE 241 WEST 72ND STREET FAC EXISTS FOR THE NEW YORK, NY 10023 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD NETWORK IN NEW** YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

INCREASING EQUITY
AND EFFICIENCY
ACROSS THE
EMERGENCY FOOD
NETWORK IN NEW
YORK CITY THIS IS
ACCOMPLISHED
PRIMARILY THROUGH
THE PROVISION OF
ADDITIONAL FOOD IN

CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL

HIGHLY

RESOURCES

NEIGHBORS TOGETHER 2094 FULTON STREET BROOKLYN, NY 112336009	11-2632109	501(C)(3)	28,659	

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(d) Amount of cash

(b) EIN

(a) Name and address of

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW SETTLEMENTS APARTMENTS 1512 TOWNSEND AVENUE BRONX, NY 10452	14-1719016	501(C)(3)	6,000				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT 130 STUYVESANT PLACE STATEN ISLAND, NY 10301	23-7085239	501(C)(3)	646,564				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable organization (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) **NEW YORK COMMUNITY** 46-1227433 501(C)(3) 1,484,633 ATTENDANCE LEARNING SCHOOL INITIATIVE **IMPROVEMENT** 52 BROADWAY DROPOUT PREVENTION NEW YORK, NY 10004 SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE **ATTENDANCE** IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN **NEW YORK CITYS** LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS. AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES PART OF THE SOLUTION 13-3471350 501(C)(3) 99.561 FOOD SUPPORT 2759 WEBSTER AVE CONNECT (FSC) -FSC BRONX, NY 10458 FACILITATES AND IMPROVES NYC RESIDENTS ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH **SPECIALIZED** COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO

DETERMINE POTENTIAL

ELIGIBILITY

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERSHIP WITH CHILDREN INC 299 BROADWAY SUITE 1300 NEW YORK, NY 10007	13-5596751	501(C)(3)	1,088,293				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
PATHWAYS TO LEADERSHIP 598 BROADWAY NEW YORK, NY 100123352	38-3886413	501(C)(3)	776,752				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable non-cash assistance grant cash or assistance or government assistance other) PHIPPS COMMUNITY 13-2707665 501(C)(3) 429,261 ATTENDANCE **DEVELOPMENT CORPORATION IMPROVEMENT** 902 BROADWAY 13TH FLOOR DROPOUT PREVENTION NEW YORK, NY 10010 SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE **ATTENDANCE** IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN **NEW YORK CITYS** LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE **IMPROVEMENT SERVICES** 11-2375583 501(C)(3) 14,119 QUEENS COMMUNITY HOUSE FOOD ASSISTANCE 108-25 62ND DRIVE COLLABORATIVE - THE FORESTHILLS, NY 11375 FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS **ACCOMPLISHED** PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL

RESOURCES

(a) Name and address of (b) EIN (d) Amount of cash (c) IRC section (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) RAUSCHENBUSCH METRO 13-3859713 501(C)(3) 10,859 FOOD ASSISTANCE **MINISTRIES** COLLABORATIVE - THE 410 W 40TH STREET FAC EXISTS FOR THE NEW YORK, NY 10018 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY AREAS L AS т то NEED URAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

				CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
RED APPLE FRUIT AND VEGETABLE 455 ALBANY AVENUE BROOKLYN, NY 11213	06-2607071	22,168		HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (g) Description of (b) EIN (d) Amount of cash (h) Purpose of grant (a) Name and address of (c) IRC section (e) Amount of non-(f) Method of valuation ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) REDSTONE STRATEGY GROUP 81-4730252 165,000 FOOD ASSISTANCE LLC COLLABORATIVE - THE 3223 ARAPAHOE AVE STE 210 FAC EXISTS FOR THE BOULDER, CO 80303 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS **ACCOMPLISHED** PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES RESTAURANT SUPPLY LLC 06-1543280 9,450 HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE,

NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES. SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND **NUTRITION ISSUES**

RESTAURANT SUPPLY LLC 312 MURPHY ROAD HARTFORD, CT 06114

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organizat	tions and Domesti	ic Governments.		<u></u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RISEBORO COMMUNITY PARTNERSHIP 217 WYCKOFF AVENUE BROOKLYN, NY 11237	11-2453853	501(C)(3)	105,861				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES FOOD SUPPORT CONNECT (FSC) -FSC FACILITATES AND IMPROVES NYC RESIDENTS ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY
ROAD TO SUCCESS 307 W 38TH ST STE 1101 NEW YORK, NY 10018	41-2166096	501(C)(3)	6,800				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROMAN CATHOLIC CHURCH OF ST CHARLES BORROMEO AND ALL SAINTS 211 WEST 141ST STREET NEW YORK, NY 10030	81-2471634	501(C)(3)	12,759				FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
SCAN-NEW YORK 245 E 87TH ST STE 11E NEW YORK, NY 10128	13-2912963	501(C)(3)	418,100				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCO FAMILY OF SERVICES 1 ALEXANDER PLACE GLENCOVE, NY 11542	11-2777066	501(C)(3)	377,591				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
SHABBOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN, NY 11225	11-3180901		13,894				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SINGER NY LLC 1200 MADISON AVENUE PATERSON, NJ 07503	23-1674739		6,433				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
SOUTHSIDE UNITED HDFC 434 SOUTH 5TH STREET BROOKLYN, NY 11211	11-2268359	501(C)(3)	40,564				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES

or government assistance other) SPORTS & ARTS IN SCHOOLS 11-3112635 501(C)(3) 791,681 ATTENDANCE **IMPROVEMENT** FOUNDATION 58-12 QUEENS BLVD SUITE 1 DROPOUT PREVENTION WOODSIDE, NY 11377 SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE **ATTENDANCE** IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS OWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND

(e) Amount of non-

cash

(f) Method of valuation

(book, FMV, appraisal,

(a) Description of

non-cash assistance

(h) Purpose of grant

AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

or assistance

CDDINGDOADD	42 274 0006	E04/6\/3\	02.750		DEADAING BEADAING IG
					LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

(d) Amount of cash

grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

if applicable

(a) Name and address of

organization

(b) EIN

THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, AMILY ENGAGEMENT. AND ATTENDANCE MPROVEMENT. SERVICES 93,750 READNYC- READNYC IS SPRINGBOARD 43-3719806 501(C)(3) COLLABORATIVE A COMPREHENSIVE, 1500 JFK BLVD ALIGNED, AND PHILADELPHIA, PA 19102 COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	ာ Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST CLEMENTS EPISCOPAL CHURCH 423 W 46TH STREET NEW YORK, NY 10036	13-2796905	501(C)(3)	12,269				FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
ST NICKS ALLIANCE 2 KINGSLAND AVENUE 2ND FLOOR BROOKLYN, NY 11211	51-0192170	501(C)(3)	491,897				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STONELEDGE FARM LLC 359 ROSS RULAND RD SOUTH CAIRO, NY 12482	20-4541185		57,240				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
TEACHER COLLEGE COLUMBIA UNIVERSITY 525 W 120TH ST NEW YORK, NY 10027	13-1624202	501(C)(3)	370,982				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHBRIDGE INC 100 PEACHTREE ST NW STE 2090 ATLANTA, GA 30303	58-2531971		113,650				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
TEENS FOR FOOD JUSTICE INC 33 W 60TH STREET SUITE 1211 NEW YORK, NY 10023	45-3591508	501(C)(3)	19,872				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

if applicable organization (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) THE CHILDREN'S AID SOCIETY 13-5562191 501(C)(3) 1,469,750 ATTENDANCE 105 E 22ND STREET **IMPROVEMENT** NEW YORK, NY 10010 DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING CHOOLS TE PREPARE

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

COLLECTIVE STRATEGY

TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN **GRADE THREE**

					PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
THE CHILDREN'S HEALTH FUND 215 W 125TH STREET STE 301	13-3468427	501(C)(3)	12,500		READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(d) Amount of cash

(c) IRC section

NEW YORK, NY 10027

(a) Name and address of

(b) EIN

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	o Domestic Organiza	tions and Domest	ic Governments.		
(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		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE DOE FUND INC 345 EAST 102ND STREET NEW YORK, NY 10029	13-3412540	501(C)(3)	6,000				HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
THE DOOR - A CENTER OF ALTERNATIVES 121 AVENUE OF THE AMERICAS NEW YORK, NY 10013	13-6127348	501(C)(3)	301,438				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Description of (h) Purpose of grant (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) THE EAGLE ACADEMY 20-1532382 501(C)(3) 7,500 READNYC- READNYC IS FOUNDATION A COMPREHENSIVE, 31 WEST 125TH STREET 3RD ALIGNED, AND COLLECTIVE STRATEGY NEW YORK, NY 10027 TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE THE EDUCATION ALLIANCE 13-5562210 501(C)(3) 421,528 ATTENDANCE 197 E BROADWAY IMPROVEMENT NEW YORK, NY 10002 DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN **NEW YORK CITYS** LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS.

AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (c) IRC section (h) Purpose of grant (book, FMV, appraisal, if applicable organization grant cash non-cash assistance or assistance or government assistance other) THE FARM AT MILLER'S 14-1811452 78,408 HUNGER PREVENTION CROSSING NUTRITION 81 ROXBURY ROAD ASSISTANCE PROGRAM HUDSON, NY 12534 (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE **NUTRITION AND** HEALTH EDUCATION EFFORTS, MONITORS **NEED AND ISSUES** RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER **EMERGENCY FOOD** PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES 13-1740429 501(C)(3) 40,150 HUNGER PREVENTION NUTRITION LONGISLAND, NY 11103 ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST **VULNERABLE**

COMMUNITIES,
SUPPORTS
COMPREHENSIVE
NUTRITION AND
HEALTH EDUCATION
EFFORTS, MONITORS
NEED AND ISSUES
RELATED TO FOOD
SECURITY, AND
PARTNERS WITH OTHER
EMERGENCY FOOD
PROVIDERS ON FOOD
SECURITY AND
NUTRITION ISSUES

THE SALVATION ARMY 45-18 BROADWAY LONGISLAND, NY 11103

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	ာ Domestic Organiza	tions and Domest	ic Governments.		
(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		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED YES WE CANUNIDOS SI SE PUEDE INC 230 EAST 123 STREET 804 NEW YORK, NY 10035	45-3703838	501(C)(3)	13,949				FOOD ASSISTANCE COLLABORATIVE - THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
URBAN ARTS PARTNERSHIP 414 BROADWAY FL 61 NEW YORK, NY 10013	13-3554734	501(C)(3)	494,735				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITYS LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

(a) Name and address of (b) EIN (d) Amount of cash (c) IRC section (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 12,927 WEST HARLEM GROUP 23-7169558 501(C)(3) FOOD ASSISTANCE ASSISTANCE INC COLLABORATIVE - THE 1652 AMSTERDAM AVE FAC EXISTS FOR THE NEW YORK, NY 10031 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ١S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

					ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
WESTSIDE CENTER FOR COMMUNITY LIFE 263 WEST 86TH ST NEW YORK, NY 10024	71-0908184	501(C)(3)	16,303		HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYCS MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER

EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

(g) Description of (b) EIN (d) Amount of cash (h) Purpose of grant (a) Name and address of (c) IRC section (e) Amount of non-(f) Method of valuation organization ıf applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) WHOSOEVER WILL BAPTIST 13-3434339 501(C)(3) 8,023 FOOD ASSISTANCE CHURCH COLLABORATIVE - THE 1651 POPHAM AVE FAC EXISTS FOR THE BRONX, NY 10453 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE **EMERGENCY FOOD** NETWORK IN NEW YORK CITY THIS IS **ACCOMPLISHED** PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN **HIGHLY** CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES 52-2336178 114,048 HUNGER PREVENTION 585 MEETING HOUSE ROAD NUTRITION ASSISTANCE PROGRAM VALLEYFALLS, NY 12185 (HPNAP) - HPNAP HELPS **ENSURE THE** ACCESSIBILITY AND

AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN

NYCS MOST **VULNERABLE** COMMUNITIES. SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND **NUTRITION ISSUES**

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WINDFLOWER FARM

or government assistance other) YVETTE JACKSON LLC 81-4017266 30.452 READNYC- READNYC IS 200 WEST 86 STREET A COMPREHENSIVE, NEW YORK, NY 10024 ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A

(e) Amount of non-

cash

(f) Method of valuation

(book, FMV, appraisal,

(a) Description of

non-cash assistance

(h) Purpose of grant

or assistance

MEMBERS

CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE ZAP CONSULTANT LLC 45-1926285 18,900 **BOARDSERVENYC -**24 LEGRAND ROAD BOARD RECRUITMENT. NORTHHAVEN, CT 06743 TRAINING, AND PLACEMENT PROGRAM. IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF

NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD

(d) Amount of cash

grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

if applicable

(a) Name and address of

organization

(b) EIN

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) ZION TABERNACLE FBH 11-2513244 501(C)(3) 15,259 FOOD ASSISTANCE CHURCH COLLABORATIVE - THE 105-01-107TH AVENUE FAC EXISTS FOR THE NEW YORK, NY 11416 PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS

CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

efil	e GRAPHIC pr	int - DO NOT PROCESS As I	Filed Data	a -	DLN: 934	19314	1005	090
Sch	edule J	Comp	pensati	ion Information	МО	1B No	1545-0	0047
(For	n 990)	For certain Officers, D	irectors, T	rustees, Key Employees, and Higl	nest			
		► Complete if the organiza	Compensation answ	ated Employees /ered "Yes" on Form 990, Part IV,	line 23.	2018		
			▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Fo</u> .	<u>rm990</u> тог	instructions and the latest inforn	nation.		to Pul ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
UNI	TED WAY OF NEW YO	JRK CITY			13-2617681			
Pa	rt I Questi	ons Regarding Compensation						
							Yes	No
1a				f the following to or for a person listed by relevant information regarding thes				
		or charter travel		Housing allowance or residence for p				
		companions	님	Payments for business use of persor				
		infication and gross-up payments	H	Health or social club dues or initiation				
	□ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cher)			
b		es in line 1a are checked, did the org		ollow a written policy regarding paym nplete Part III to explain	ent or reimbursement	1b		
2		tion require substantiation prior to re			1-2	2		
	directors, truste	es, officers, including the CEO/Execut	ive Directo	r, regarding the items checked in line	lar			
3				ed to establish the compensation of th	e			
	_	EO/Executive Director Check all that d organization to establish compensa:		not check any boxes for methods CEO/Executive Director, but explain ii	n Part III			
	✓ Compensa	tion committee		Westen employment contract				
		ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	☑	Approval by the board or compensation	tion committee			
_		-						
4	related organiza		art VII, Se	ction A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sever	ance payment or change-of-control pa	avment?			4a		No
ь		receive payment from, a supplement	•	ified retirement plan?		4b		No
С	•	receive payment from, an equity-ba	· ·	•		4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and prov	ride the app	olicable amounts for each item in Part	III			
	0	. 504(-)(4)						
5) , 501(c)(4), and 501(c)(29) orga d on Form 990, Part VII, Section A, li		-				
•		ontingent on the revenues of	ine ra, ala	the organization pay or accrac any				
а	The organization	17				5a		No
b	Any related orga	inization?				5b		No
	•	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, li ontingent on the net earnings of	ine 1a, did	the organization pay or accrue any				
а	The organization	17				6a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7	payments not de	escribed in lines 5 and 6? If "Yes," de	scribe in Pa		I	7		No
8		nts reported on Form 990, Part VII, p Itial contract exception described in R		red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe			
						8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow the	rebuttable	presumption procedure described in	Regulations section	9		
For E	``	ction Act Notice, see the Instruct	ions for Fo	orm 990 Cat No. 5	0053T Schedule 1		1 990)	2018

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Instructions, on row (II) Do not list any individuals that are not listed on Form 990, Part VII

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

Note. The sum of columns (E		(1)-(111) for each fisted inc	uividual must equal the to	ital amount of Form 990,	rait VII, Section A, line	i maividual		
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 GINA GOODENOW SVP, CFO (OUTGOING)	(i)	250,643	0	381	3,312	39,021	293,357	0
	(ii)	0	0	0	0	0	0	0
	(i)	407,042	0	1,204	12,492	26,394	447,132	0
· 	(ii)	0	0	0	0	0	0	0
3 JACQUELINE JENKINS SVP. CHIEF TRANSF	(i)	221,804	0	373	6,900	20,528	249,605	0
OFFICER	(ii)	0	0	0	0	0	0	0
	(i)	217,500	0	875	6,525	0	224,900	0
LINDERWOOD	(ii)	0	0	0	0	0	0	0
	(i)	134,556	0	950	4,300	28,816	168,622	0
AVI, ASSI CONTROLLER	(ii)	0	0	0	0	0	0	0
	(i)	204,610	0	325	6,300	15,147	226,382	0
OFFICER	(ii)	0	0	0	0	0	0	0
	(i)	146,626	0	536	4,500	13,131	164,793	0
MARKETING	(ii)	0	0	0	0	0	0	0
8 VICTOR MILLSAP	(i)	143,345	0	999	4,500	26,694	175,538	0
VP, INFORMATION TECHNOLOGY	(ii)	0	0	0	0	0	0	0
	(i)	184,952	0	1,540	5,707	15,495	207,694	0
OE .	(ii)	0	0	0	0	0	0	0
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							Schedule	עווטון באַ (ווווטון בּיַ וווויטון בּיַ €

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

Additional Data

(1)

(11) (1)

(11)

143,345

184,952

VICTOR MILLSAP VP, INFORMATION TECHNOLOGY

WALLACE BACHMAN

SENIOR VP, CHIEF TALENT OF

				13-2617681					
Form 000 Sahadula		Doub II Officers D		UNITED WAY OF NEV		d Familian			
(A) Name and Title	; J,	•	of W-2 and/or 1099-MISO	C compensation (iii)	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred on	
			Bonus & incentive compensation	Other reportable compensation	compensation			prior Form 990	
GINA GOODENOW SVP, CFO (OUTGOING)	(1)	250,643 	0	381	3,312	39,021	293,357	0	
	(11)	0	0	0	0	0	0	0	
SHEENA WRIGHT PRESIDENT, CEO	(1)	407,042	0	1,204	12,492	26,394	447,132	0	
	(11)	0	0	0	0	0	0	0	
SVP, CHIEF TRANSF	(1)	221,804	0	373	6,900	20,528	249,605	0	
OFFICER	(11)	o	0	0	o	0	0	0	
LESLEIGH IRISH- UNDERWOOD	(1)	217,500	0	875	6,525	0	224,900	0	
VP, CHIEF MARKETING OFF	(11)	o	0	0	0	0	0	0	
CATHY PETRUCCI AVP, ASST CONTROLLER	(1)	134,556	0	950	4,300	28,816	168,622	0	
	(11)	0	0	0	0	0	0	0	
MEGHAN BROWN SVP, CHIEF DEVELOP	(1)	204,610	0	325	6,300	15,147	226,382	0	
OFFÍCER	(11)	o	0	0	0	0	0	0	
MICHELLE MATHESON VP, EXPERIENTIAL	(1)	146,626	0	536	4,500	13,131	164,793	0	
MARKETING	(11)	О	0	0	0	0	0	0	

999

1,540

4,500

5,707

26,694

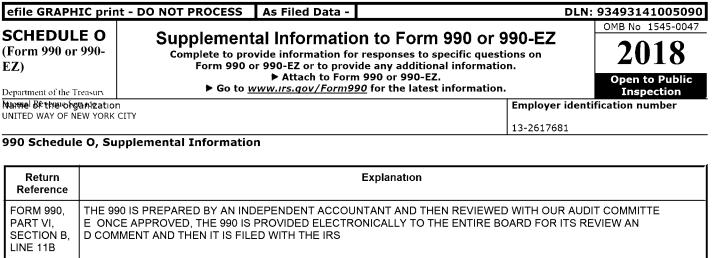
15,495

175,538

207,694

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493141005090 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ 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. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** UNITED WAY OF NEW YORK CITY 13-2617681 **Types of Property** (b) (c) (d) (a) Method of determining Check if Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests Books and publications Х 5,000 FMV Clothing and household 15,000 THRIFT VALUE Χ goods Cars and other vehicles Boats and planes . . Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . Χ 40,000 FMV 25 Other ▶ (JETS AND GIANTS CAPS) 26 Other ▶ (_____ 28 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 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 is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2					
Part II Supplemental Information.						
Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in						
I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete						
this part for any add	itional information.					
Return Reference Explanation						
PART I, COLUMN (B) THE NUMBER IN COLUMN (B) IS THE NUMBER OF CONTRIBUTIONS						
<u> </u>	Schedule M (Form 990) (2018)					



Retur Referer		Explanation
FORM 99 PART VI, SECTION LINE 120	, N B,	UWNYC'S BOARD MEMBERS, OFFICERS, SENIOR EXECUTIVES AND CERTAIN OTHER DESIGNATED EMPLOYEES ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST DISCLOSURE STATEMENTS ANNUALLY AND HAVE AN O BLIGATION TO UPDATE SUCH STATEMENTS THROUGHOUT THE FISCAL YEAR THE INFORMATION IS REVIEWE D BY THE GENERAL COUNSEL AND CATALOGUED RELATED PARTY ISSUES ARE REGULARLY SCRUTINIZED AN DADDRESSED AS PART OF THE GRANTMAKING PROCESS AND VENDOR SELECTION PROCESS THE APPROPRIA TE BOARD COMMITTEE REVIEWS THE PROPOSED TRANSACTION, REVIEWS THE RATIONALE AND COMPARABILI TY DATA, AND DETERMINES WHETHER TO PROCEED THE ORGANIZATION HAS PROTOCOLS TO BE FOLLOWED BY STAFF IN ORDER TO REVIEW AND ADDRESS CONFLICTS RELATING TO NON-EXECUTIVE STAFF MEMBERS

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

Return Explanation

FORM 990,
PART VI,
SECTION C,
LINE 19

THE ORGANIZATION'S FORM 990 IS AVILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6
104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR ORG AND OTHER SIMILAR
TYPES OF WEBSITES IN ADDITION, THE FINANCIAL STATEMENTS, ARTICLES OF INCORPORATION FORM 9
90, FORM 1023 AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST OR BY CALLING THE ORAGNI
ZATION DIRECTLY

Return Explanation

Kelefelice	
FORM 990,	PENSION RELATED CHANGES -98,721 CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST 4,018
PART XI,	
LINE 9	

Return Explanation
Reference

FORM 990,	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF
PART XII,	ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS DID NOT
LINE 2C	CHANGE FROM THE PRIOR YEAR