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Department of the

## **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.

 $\blacktriangleright$  Go to  $\underline{www.irs.gov/Form990}$  for instructions and the latest information.

2019

DLN: 93493133040531

Open to Public Inspection

OMB No. 1545-0047

		nue Service	I .				<u> </u>			
			calendar year, or tax year beginning 07-01-2019 , and ending 06-3	0-2020						
	dress	ipplicable: change iange	C Name of organization UNITED WAY OF NEW YORK CITY		D Employer 13-26176		cation number			
☐ Ini	tial re	_	Doing business as							
		d return on pending		uite	E Telephone (212) 25					
			City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10017		<b>G</b> Gross rece	ipts \$ 63	3,348,888			
			F Name and address of principal officer:	H(a) Is	s this a group retu	rn for				
			SHEENA WRIGHT 205 EAST 42ND STREET		ubordinates?		□Yes ☑No			
			NEW YORK, NY 10017		re all subordinate cluded?	5	☐ Yes ☐No			
_		mpt status	$\blacksquare$ 501(c)(3) $\square$ 501(c)( ) $\P$ (insert no.) $\square$ 494/(a)(1) or $\square$ 52/	1	f "No," attach a lis	•	•			
J W	ebsit	te:► W\	VW.UNITEDWAYNYC.ORG	H(c) G	iroup exemption n	umber	<b>-</b>			
<b>K</b> Forr	n of o	rganizatior	: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	<b>L</b> Year of	formation: 1968	<b>1</b> State	of legal domicile: NY			
Pa	art I	Sum	mary	1	<u> </u>					
Activities & Governance		PROFITS INCOME I USE LESS PREVENT SECTOR I	VAY OF NEW YORK CITY UNIQUELY WORKS WITH BUSINESS, GOVERNMEN TO TACKLE THE ROOT CAUSES OF POVERTY. WE DESIGN AND INVEST IN NEW YORKERS ARE ABLE TO MEET BASIC NEEDS AND BUILD A BETTER FURIONS LEARNED TO LEVERAGE A WORLDWIDE NETWORK OF UNITED WAYS AND ALLEVIATE POVERTY CITYWIDE. UNITED WAY OF NEW YORK CITY FOR YORKING COLLECTIVELY WITH A CONSORTIUM OF NON-PROFITS WITH BY THE PUBLIC IN THE AREAS OF EDUCATION, INCOME AND HEALTH.	EVIDENCE TURE. WE TO INFOR OSTERS A N	-BASED INITIAŤIN RIGOROUSLY EVA M AND ADVANCE MORE ROBUST AN	'ES THA LUATE PUBLIC D EFFE	AT ENSURE LOW- OUR WORK AND POLICIES THAT CTIVE NON-PROFIT			
<b>&gt;≎</b> ⊗e			is box $ ightharpoonup$ if the organization discontinued its operations or disposed of r							
Ě	l		of voting members of the governing body (Part VI, line 1a)			3	49			
Act	l	4 Number of independent voting members of the governing body (Part VI, line 1b)								
	l									
	l		related business revenue from Part VIII, column (C), line 12			7a	1,334			
	b	Net unre	lated business taxable income from Form 990-T, line 39			7b	0			
					Prior Year		Current Year			
<u>a</u> i	8	Contribu	tions and grants (Part VIII, line 1h)		53,752,42	.3	59,900,733			
Ravenue	l	_	service revenue (Part VIII, line 2g)		104,47	_	66,538			
č	l	Investm	6	103,033						
	l	Other re	6	186,788 60,257,092						
	<del>                                     </del>		renue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)  nd similar amounts paid (Part IX, column (A), lines 1–3 )		54,123,36 41,584,73		42,286,006			
	l		paid to or for members (Part IX, column (A), line 4)		41,304,73	0	42,280,000			
ç	l		other compensation, employee benefits (Part IX, column (A), lines 5–10)		7,809,39	-	7,645,128			
Expenses	l		onal fundraising fees (Part IX, column (A), line 11e)			0	137,750			
9	b	Total fund	raising expenses (Part IX, column (D), line 25) ▶4,758,622							
Ð	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,300,14	4	7,105,502			
	18	Total exp	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		56,694,26	9	57,174,386			
. (0	19	Revenue	less expenses. Subtract line 18 from line 12		-2,570,90		3,082,706			
Net Assets or Fund Balances				Begin	ning of Current Yea	ir	End of Year			
Sse Bala	20	Total ass	sets (Part X, line 16)		32,015,61	5	45,472,498			
\$ E	l		oilities (Part X, line 26)		25,595,50	0	36,664,980			
			ts or fund balances. Subtract line 21 from line 20		6,420,11	.5	8,807,518			
Undei	ledge	alties of periods and believed	nature Block perjury, I declare that I have examined this return, including accompanying ef, it is true, correct, and complete. Declaration of preparer (other than offi							
		11.****	*		2021 05 12					
Sign		Signat	ture of officer		2021-05-13 Date					
Here			/ PETRUCCI PRESIDENT / CEO or print name and title							
			·	Date	□ □ PT	IN				
Paid	4			2021-05- <b>1</b> 2		0535099				
Pre		er	Firm's name MARKS PANETH LLP		Firm's EIN ► 11-3	518842				
Use		H	Firm's address ▶ 685 THIRD AVENUE		Phone no. (212) 50	3-8800				
			NEW YORK, NY 10017		CHOILE 110. (212) 50	J-00UU				
May t	he ID	S discus	s this return with the preparer shown above? (see instructions)		1		es 🗆 No			
			duction Act Notice, see the separate instructions.	Cat. N	No. 11282Y	Y L	Form <b>990</b> (2019)			

Cat. No. 11282Y

Form	990 (20	)19)					Page					
Pa	irt III	Statement	of Program Servi	ce Accomplis	hments							
		Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III .		🗹					
1	Briefly	describe the o	organization's mission:									
MEETOPPO INDI TO A	F AND LE DRTUNIT VIDUALS CCOMPL	AD SELF-SUFF IES THAT IMPI AND FAMILIE ISH THAT WE	FICIENT LIVES. OUR M ROVE THE LIVES OF LO ES HAVE ACCESS TO Q	ISSION IS TO M DW-INCOME NEV UALITY EDUCAT S, PRACTICES, A	OBILIZE OUR COMMUN W YORKERS FOR THE BE ION AND THE OPPORTU	O TO HELPING LOW-INCOME NEW ITIES TO BREAK DOWN BARRIERS ENEFIT OF ALL. WE ENVISION A CI INITY TO LEAD HEALTHY AND FINA HBORHOODS OF CONCENTRATED	S AND BUILD ITY WHERE ALL ANCIALLY SECURE LIVES					
2	the pri	or Form 990 o	r 990-EZ?		vices during the year wl	nich were not listed on	□Yes ☑No					
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?											
4	,											
4a	(Code: See Add	litional Data	) (Expenses \$	20,442,152	including grants of \$	18,631,032 ) (Revenue \$	233,086 )					
4b	(Code:	ditional Data	) (Expenses \$	6,495,046	including grants of \$	5,194,975 ) (Revenue \$	)					
4c	(Code: See Add	ditional Data	) (Expenses \$	3,490,077	including grants of \$	3,491,692 ) (Revenue \$	)					
4d		Iditional Data	Table ces (Describe in Sched	ula O )								
4u	(Exper			ule 0.) luding grants of	\$ 14,968,3	07 ) (Revenue \$	)					
4e	Total	program serv	/ice expenses ►	47,196,5	32							

Form	990 (2019)			Page <b>3</b>
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	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	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 2	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III $\footnote{S}$ .	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? <i>If "Yes," complete Schedule D,</i> Part   2	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	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? <i>If "Yes," complete Schedule D, Part V</i>	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	
	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 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
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	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	12a	165	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?	13 14a		No
	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

 $\mathbf{b}$  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

Yes

20b

21

rm :	990 (2019)			Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
	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	
	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		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
2	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
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
4	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
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u> .		
			Yes	No

1a

1b

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

 ${f b}$  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

72

0

1c

Yes

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a	86		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority of financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:			No
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA	AR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organizat solicit any contributions that were not tax deductible as charitable contributions?	tion <b>6a</b>		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	were 6b		
7	3			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s provided to the payor?	services <b>7a</b>	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	to file <b>7c</b>		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	s <b>7g</b>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F 1098-C?	orm 7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	· 13a		
b	Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or e parachute payment(s) during the year?	⊢ ⊢		No
16	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 "Yes," complete Form 4720, Schedule O.	. 16		No

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See inst	tructions.		lines <b>V</b>
Se	Check if Schedule O contains a response or note to any line in this Part VI			
	and Hall Governing Body and Hallagement		Yes	No
1a	a Enter the number of voting members of the governing body at the end of the tax year   1a	49		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b	49		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?			No
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person?	<del></del>	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990	0 was filed? . 4		No
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ts? . <b>5</b>		No
6	Did the organization have members or stockholders?	6		No
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or app members of the governing body?	oint one or more <b>7a</b>		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto persons other than the governing body?			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken du the following:	ıring 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 cannot be reac organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>			No
Se	ection B. Policies (This Section B requests information about policies not required by the I	nternal Revenue Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?			No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chap and branches to ensure their operations are consistent with the organization's exempt purposes?	pters, affiliates,   <b>10b</b>		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body form?	before filing the	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that conconflicts?	uld give rise to 12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes Schedule O how this was done	s," describe in	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	y independent		
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen			
	taxable entity during the year?	16a		No
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi status with respect to such arrangements?	ization's exempt		
Se	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶	I ME MA NI NV N	C 01	DA DI
	CA , CT , DC , FL , GA , I , SC , VA	E, IND, INA, INJ, INT, IN	С, ОП,	ra, KI
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-only) available for public inspection. Indicate how you made these available. Check all that apply.	Γ (501(c)(3)s		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books CATHY PETRUCCI 205 EAST 42ND STREET NEW YORK, NY 10017 (212) 251-2449	and records:		

<ul> <li>List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.</li> <li>Isist all of the organization's current key employees, if any. See instructions for definition of "key employee."</li> <li>List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations.</li> <li>List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations.</li> <li>List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations.</li> <li>Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.</li> <li>(A)  Name and title          (B)  Average hours per week (list any hours below dotted line)          (B)  Average hours per week (list any hours per week (list any hours below dotted line)          (B)  Average hours per week (list any hours per week (list any hours below dotted line)          (C)  Average hours per week (list any hours per week list any hours per week (list any hours per week list any hours per week l</li></ul>	Form 990 (2019)											Pag	ge <b>7</b>
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid.  ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (B)  Name and title  ■ (C)  Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear.  List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  List all of the organization's furrent key employees, if any. See instructions for definition of "key employee."  List all of the organization's furrent key employees, if any. See instructions for definition of "key employee."  List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 from the organization and any related organizations.  List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization or any current officer, director, or trustee.  (A)  Name and title  (B)  Average hours per week (list any hours for related organizations below dotted line)  Average hours per beneficer and a director/trustee)  List all of the organization or any related organization	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [	
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization.  ■ List all of the organization which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ (B)  Average hours per week (list any hours for related organizations below dotted line)  ■ (C)  Reportable compensation from the organization organization organization organization organizations organi	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee."  ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations.  ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. See instructions for the order in which to list the persons above.  □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line)  ■ Check this box if neither the organization below dotted line)  ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line)  ■ Check this box if neither the organization or any related organi	year.		•						, ,		-	n's ta	Κ
List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.      ● List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.      ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization.      ● List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization.      ● List all of the organization than \$10,000 of reportable compensation from the organization nor any related organization and any related organization compensated any current officer, director, or trustee.	of compensation. Enter -0- in columns (D), (	E), and (F) if no	compe	nsati	on w	/as	oaid.		.,				
who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.  ■ List all of the organization from the organization and any related organizations.  ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.  ■ List all of the organization's <b>former directors or trustees</b> that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee)  ■ Check this box if neither the organization nor any related organization organization (W-2/1099-MISC)  ■ Check this box if neither the organization nor any related organization organization nor any related organization organization organization (W-2/1099-MISC)  ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any neithe													
■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.  Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.  (A)  Name and title  (B)  Average hours per week (list any hours below dotted line)  (C)  (D)  (E)  Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee)  (W-2/1099-MISC)  MISC)  (F)  Estimated amount of other compensation from the organization organization organization and related organizations.													
Average hours per week (list any hours for related organizations) below dotted line)    Continue to the person of the order in which to list the persons above.    Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title  (B) Average hours per week (list any hours for related organizations below dotted line)  (B) Average hours per week (list any hours for related organizations below dotted line)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (B) Average hours per week (list any hours for related organization (W-2/1099-MISC)  (B) Reportable compensation from the organizations (W-2/1099-MISC)  MISC)  (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title  Average hours per week (list any hours for related organizations below dotted line)  Name and title  Average hours per week (list any hours for related organizations below dotted line)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	nated of oth nsation the	n	
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	rel	ated	
	See Additional Data Table												
													—
													—

Form	990 (2019)														Page <b>8</b>
Pai	tVII Section A. Officers, Direct	tors, Trustees	, Key I	Empl	oye	es,	and	High	nest Cor	npens	ate	d Employees	(con	tinued)	
	(A) Name and title Average hours per week (list any hours		than one box, unless person com is both an officer and a director/trustee) org						Repo compe fror orgar	(D) Reportable compensation from the organization		(E) Reportable compensation from related organizations	,	Estim amount of compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		:/1099- ISC)		(W-2/1099- MISC)	organizat relat organiz	ed	
See	Additional Data Table														
c T	oub-Total	art VII, Section	Α.				<b> </b>								
2	Total (add lines 1b and 1c)  Total number of individuals (including of reportable compensation from the	but not limited	to thos				►  e) who	rece		623,841 re than	\$10	00,000	0		182,426
														Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule 3</i>										ted •	employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repose s greater than \$	ortable ( 150,00	comp 0? <i>If</i> •	ensa "Yes •	atior ," c	n and o omple	other te Sc	compens	sation f for suc	rom h	the	4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization												5		No
Se	ction B. Independent Contract	ors													<u> </u>
1	Complete this table for your five high from the organization. Report compet												mper	nsation	
		(A) and business addre	ess									(B) iption of services		Compe	nsation
	E GROUP LLC APPOCK STREET APT 26E									INSTRU	CTIO	NAL LEADERSHIP			494,575
BRON	X, NY 10463 L MANAGEMENT ASSOCIATES									TEMPOR	ARV	CEO			196,050
600 T	HIRD AVE 3RD FLOOR NY NY 10									TEMPOR	AIXI	CIO			190,030
	YORK, NY 10016 SS STAFFING								,	TEMPOR	ARY	STAFF			174,914
PHILA	OX 823473 DELPHIA, PA 19182														
674 C	DY FLEISCHER, ARROLL ST KLYN, NY 11215								ADMINISTRATIVE CONSULTING			j		148,787	
THE T	ASC GROUP									MARKET	ING				128,890
	ARREN PLACE CLAIR, NJ 07042														

		(2019)								Page <b>9</b>
Part	VIII	<del></del>			recno	onse or note to any	line in this Part VIII			$\square$
		Check if Sched	uie	O contains a	respo	inse of flote to arry	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a	Federated campa	igns	·	1a	18,298,048		revenue		512 - 514
tributions, Gifts, Grants Other Similar Amounts	ŀ	<b>b</b> Membership dues	5.	. [	1b					
Gra not	(	c Fundraising even	ts .	. [	1c	917,116				
ts' A		d Related organizat	tions	, [	1d					
Gifts, nilar A		e Government grants	(con	tributions)	1e	27,149,633				
ns, Sir	f	F All other contributio	ns, g	ifts, grants,						
utio		and similar amounts above		L	1f	13,535,936				
를	g	g Noncash contributio lines 1a - 1f:\$	ns in	cluded in	1g	64,532				
Contributions, and Other Sim	١,	<b>h Total.</b> Add lines 1	1a-1	f		>				
						Business Code	59,900,733			Γ
	2a	CAMPAIGN FEES				900099	66,538	66,538		
жıе						, , , ,				
ever	b									
9. ₽	c									
ervic										
Š	d									
Program Service Revenue	e									
Æ										
		All other program								
		Total. Add lines 2				66,538	1	I	T	T
	s	Investment income similar amounts)			•	•	128,708			128,708
		Income from invest				_	1			
	5 1	Royalties	·	(i) Real		(ii) Personal	·			
		Gross rents	6a	10	06,715	5				
	b	Less: rental expenses	6b	29	94,340					
	С	Rental income or (loss)	6c	-18	37,625	5				
	d	Net rental income					_ -187,625			-187,625
				(i) Securit	ies	(ii) Other				
	7a	Ya Gross amount from sales of assets other than inventory			33,785	5				
	b	Less: cost or other basis and sales expenses	7b	2,75	59,460	)				
		·					1			
		Gain or (loss)  Net gain or (loss)	7c		25,675					-25,675
		Gross income from fu				· · · •	,			,
nue		(not including \$ contributions reported		917,116 of line 1c).						
eve		See Part IV, line 18	•		8a	58,236				
r R		Less: direct expen			8b	37,996	_			20.240
Other Revenue	С	: Net income or (los	s) fr	om fundraisir	ng ev	ents 🕨	20,240			20,240
	9a	Gross income from g See Part IV, line 19		ing activities.						
	h				9a 9b					
		Less: direct expending Net income or (los				ies	J			
	10a	aGross sales of inve returns and allowa			10a					
	b	Less: cost of good	s sol	ld	10b					
	С	Net income or (los			nvent	ory				
		Miscellaneo				Business Code	300 543	200 542		
	11	aFORGIVENESS OF	DE	ВТ		900099	290,542	290,542		
	h	TOWN FLEY COED				900099	32,059	32,059		
		UWW FLEX CREDI	.1			30003.	32,333	52,533		
	C	OTHER INCOME				900099	31,572	31,572		<del> </del>
	d	All other revenue								
	е	Total. Add lines 1	1a-1	11d		•	354,173			
	12	<b>Total revenue.</b> Se	ee ir	nstructions .			60,257,092		(	-64,352
							00,237,092	720,711	1	Form <b>990</b> (2019)

Ρ	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must c	complete all columns.	All other organization	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to ar not include amounts reported on lines 6b,	ny line in this Part IX (A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses 42,007,817	expenses 42,007,817	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	42,007,817	42,007,817		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	278,189	278,189		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	871,147	205,782	665,365	
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	5,453,047	2,465,699	1,151,672	1,835,676
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	727,115	291,813	240,325	194,977
9	Other employee benefits	90,409	42,327	16,491	31,591
	Payroll taxes	503,410	199,161	173,755	130,494
	Fees for services (non-employees):				
	ı Management	47.064		47.064	
	Legal	47,864		47,864	
	Accounting	115,545 55,050		115,545 55,050	
	Lobbying	137,750		55,050	137,750
	Professional fundraising services. See Part IV, line 17	46,863		46,863	157,730
	Investment management fees  Other (If line 11g amount exceeds 10% of line 25, column	1,482,374	189,800	910,948	381,626
٠	(A) amount, list line 11g expenses on Schedule ()	1,102,371	105,000	310,510	301,020
12	Advertising and promotion	623,645	4,385		619,260
13	Office expenses	181,284	36,111	114,948	30,225
14	Information technology	212,441	31,335	127,316	53,790
15	Royalties				
16	Occupancy	1,154,185	560,242	285,083	308,860
17	Travel	39,753	4,714	26,030	9,009
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	93,423	10,728	69,136	13,559
20	Interest	631,295	297,899	169,165	164,231
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	483,589	254,790	117,010	111,789
23	Insurance	176,652	85,747	43,633	47,272
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a UBIT	7,735	3,060	2,670	2,005
	b DUES TO NAT'L, AND STAT	855,571	199,726	101,632	554,213
	c BAD DEBT EXPENSE	615,533		615,533	
	d EQUIP. RENTALS & EXP.	133,768	19,732	80,158	33,878
	e All other expenses	148,932	7,475	43,040	98,417
25	Total functional expenses. Add lines 1 through 24e	57,174,386	47,196,532	5,219,232	4,758,622
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).				

Form 990 (2019)

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Assets

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18

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21

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25

26

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28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 6,801,302

24,112,915

98,994

17,355

73,453

6,521,048

6,082,369

1,765,062

45,472,498

2,471,438

17,363,314

1,674,809

9,981,518

5,173,901

36.664.980

779,475

8,028,043

8,807,518

45,472,498

Form 990 (2019)

(B) End of year

Beginning of year

1,051,538

172,251

351,803

7,279,681

5,780,432

2,355,859

32,015,615

2,241,726

9.330.065

10,176,209

3,847,500

25.595.500

1,550,058

4,870,057

6,420,115

32,015,615

15,024,051

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10c

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

Inventories for sale or use .

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Tax-exempt bond liabilities . .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

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

Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \\ \text{and} \end{align\*}

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

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Cash-non-interest-bearing . . . . . Savings and temporary cash investments .

Pledges and grants receivable, net . . . Accounts receivable, net Loans and other payables to any current or former officer, director, trustee,

key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . .

10a

9.234,785 10b 2,713,737

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a Nο

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. 3h Form 990 (2019)

### Additional Data

Software ID:

**Software Version:** 

FIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990 (2019)

#### Form 990, Part III, Line 4a:

EDUCATION: UNITED 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. UNITED 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, CRITICAL TECHNOLOGY ACCESSIBILITY, 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 FOR CHILDREN AND SETTING THEM ON THE PATH FOR FUTURE SUCCESS. PARENT EMPOWERMENT A CRITICAL COROLLARY TO OUR PARENT ENGAGEMENT LEVER READNYC AIMS TO HELP PARENTS PROVIDE A STABLE AND SUPPORTIVE LEARNING ENVIRONMENT AT HOME. AS PART OF OUR MOTT HAVEN PARENT COLLECTIVE WORKSHOPS, WE HAVE A DUAL-FOCUS ON LITERACY AND FINANCIAL EMPOWERMENT; WORKSHOPS SHIFT FROM EXCHANGING KNOWLEDGE ON LITERACY AND RESOURCES FOR OUR CHILDREN. TO SHARING RESOURCES THAT FAMILIES CAN LEVERAGE FOR THEMSELVES AND THEIR COMMUNITY. THE WOMEN'S CENTER FOR EDUCATION AND CAREER ADVANCEMENT (WCECA) PRESENTS TO OUR PARENTS ON SELF-SUFFICIENCY, I.E. ESTIMATING A BUDGET NEEDED TO SUSTAIN A FAMILY TO DEMONSTRATE THE TRUE COSTS OF LIVING IN NYC. WE ALSO INVITE LIFT-NY, AS ONE OF THE CORE READNYC PARTNERS, TO PRESENT TO PARENTS ON THE MANY SERVICES THEY CAN OFFER FAMILIES. SUCH AS FINANCIAL COACHING, ADDITIONALLY, WE HOLD OUR ANNUAL READNYC TAX DAYS IN CONJUNCTION WITH ARIVA. ARIVA PROVIDES FINANCIAL COUNSELING AT THE TAX DAYS AND TWO ADDITIONAL FINANCIAL EMPOWERMENT WORKSHOPS FOR OUR FAMILIES. PARENT EMPOWERMENT A CRITICAL COROLLARY TO OUR PARENT ENGAGEMENT LEVER

#### HEALTHY FOOD ACCESS:UNITED 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. MEMBERS OF THE FAC ARE UNIFIED IN THEIR MISSION TO DIRECT

Form 990, Part III, Line 4b:

EMERGENCY FOOD RESOURCES EFFECTIVELY AND EFFICIENTLY TO NEW YORK CITY'S MOST-VULNERABLE NEIGHBORHOODS. THROUGH CAPACITY BUILDING AND FOOD

PANTRY SUPPORT, THE FAC WAS ABLE TO ASSIST LOCAL PANTRIES DISTRIBUTE ANOTHER 15 MILLION POUNDS OF FOOD ANNUALLY.

Form 990, Part III, Line 4c: COVID-19 COMMUNITY FUNDESTABLISHED IN MARCH 2020, THIS FUND WAS CREATED BY UNITED WAY OF NEW YORK CITY IN DIRECT RESPONSE TO THE CORONAVIRUS PANDEMIC THAT DRASTICALLY AFFECTED THE PEOPLE OF NEW YORK CITY. THE FUND WOULD DISTRIBUTE RESOURCES AND FINANCIAL ASSISTANCE TO COMMUNITY BASED ORGANIZATIONS AND NONPROFIT PARTNERS THAT WORK IN UNDERSERVED NEIGHBORHOODS ACROSS THE CITY TO PROVIDE SHORT TERM IMMEDIATE RELIEF. AND WORK TOWARD CREATING LONG TERM RECOVERY EFFORTS. THE FUND WOULD INVEST IN PROGRAMS FOCUSING ON THE ISSUES OF ADVOCACY AND POLICY

CHANGE, BENEFITS ACCESS, EVICTION, AND CRISIS SUPPORT, EDUCATION SUPPORT, FOOD AND HUNGER RELIEF, AND ORGANIZATIONAL SUPPORT.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

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

others, the total expenses, and revenue, if any, for each program service reported.

AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

(Code: ) (Expenses \$ 474,623 including grants of \$ 66,700 ) (Revenue \$ BOARDSERVENYC CONNECTS NONPROFIT PARTNERS WITH TALENTED AND COMMITTED INDIVIDUALS WHO ARE EAGER TO SHARE THEIR SKILLS

AND EXPERTISE AS BOARD MEMBERS. BOARDSERVENYC HELPS VOLUNTEERS STRENGTHEN THEIR LEADERSHIP SKILLS, IMPACT POSITIVE CHANGE IN HIGH-NEED COMMUNITIES. AND EXPAND BOTH THEIR PROFESSIONAL AND PERSONAL NETWORKS.

(Code: ) (Expenses \$ 1,101,631 including grants of \$ 1,091,937 ) (Revenue \$

CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING FIVE

COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH

NONPROFIT ORGANIZATION WILL BE FUNDED AT \$250,000 PER YEAR FOR FOUR YEARS AND RECEIVES TECHNICAL ASSISTANCE SUPPORT

TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS,

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

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

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: ) (Expenses \$ 1,109,227 including grants of \$ 474,172 ) (Revenue \$ FOOD SUPPORT CONNECTIONS (FSC) UNITED WAY OF NEW YORK CITY'S (UWNYC) FOOD SUPPORT CONNECTIONS (FSC) PROGRAM IS A RESOURCE FOR INCOME-ELIGIBLE NYC INDIVIDUAL FAMILIES TO ENROLL IN SNAP BENEFITS. SNAP, FORMERLY KNOWN AS FOOD STAMPS, IS THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM; WITH SNAP'S ELECTRONIC BENEFIT TRANSFER (EBT) CARD, HOUSEHOLDS CAN

PURCHASE FOOD AND OTHER QUALIFIED FOOD-RELATED ITEMS. SNAP ALSO OFFERS PROGRAMS TO HELP YOU LEARN TO EAT HEALTHILY AND

BE ACTIVE. NONPROFIT PARTNERS CONDUCT GRASSROOTS OUTREACH AND FACILITATE CLIENTS ACCESS TO BENEFITSWORKING TO

DETERMINE ELIGIBILITY. ASSIST WITH THE APPLICATION PROCESS. SCHEDULE APPOINTMENTS. AND ADVOCATE IF BARRIERS ARE ENCOUNTERED.

(Code: ) (Expenses \$ 997,811 including grants of \$ 256,540 ) (Revenue \$ UNITED WAY OF NEW YORK CITY (UWNYC) PARTNERED WITH NYC CENSUS 2020'S COMPLETE COUNT FUND AND CITYWIDE PARTNERS TO GUIDE

THE DEVELOPMENT OF THE NYC CENSUS 2020 CAMPAIGN PLAN. THE DEVELOPMENT OF THE COMPLETE COUNT FUND GOALS FOR THE CENSUS.

SUPPORT COLLABORATION AMONG COMMUNITY-BASED PARTNERS, AND PROVIDE GRANT MANAGER SUPPORT FOR 66 OF THE 157 AWARDED

ORGANIZATIONS WITH A FOCUS OF REACHING TRADITIONALLY HARD-TO-COUNT COMMUNITIES. UWNYC ALSO PARTNERED WITH ROBIN HOOD

FOUNDATION TO INCREASE CENSUS OUTREACH AND ENGAGEMENT AMONG BLACK COMMUNITIES, WHICH PROVIDED MICRO-GRANTS TO

COMMUNITY-BASED ORGANIZATIONS FOCUSED ON MOBILIZING THE BLACK COMMUNITY. UWNYC, IN PARTNERSHIP WITH HESTER STREET

COLLABORATIVE, LAUNCHED A SUCCESSFUL SERIES OF CENSUS 2020 COMMUNITY COLLABORATION CONVENINGS THAT INCREASED

COMMUNITIES' AWARENESS OF THE CENSUS, BUILT THE CAPACITY OF COMMUNITY-BASED ORGANIZATIONS TO REACH HARD-TO-COUNT

COMMUNITIES, FOSTERED COLLABORATION, AND LAID THE FOUNDATION FOR ONGOING COLLABORATION AND CIVIC ENGAGEMENT.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

ection 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocat	ions to
thers, the total expenses, and revenue, if any, for each program service reported.	

(Code:	) (Expenses \$	12,809,018	including grants of \$	12,809,018 ) (Revenue \$	)
DESIGNATIONS					

(Code:	) (Expenses \$	12,809,018	including grants of \$	12,809,018 ) (Revenue \$	)
DESIGNATIONS					

(Code:	) (Expenses \$	12,809,018	including grants of \$	12,809,018 ) (Revenue \$	)
DESIGNATIONS					

(Code:	) (Expenses \$	12,809,018	including grants or \$	12,809,018 ) (Revenue \$	)
ESIGNATIONS					

276,947

including grants of \$

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) (Expenses \$

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
AMANI TOOMER DIRECTOR	1.00	Х						0	0	0	
ANDREW ALFANO DIRECTOR	1.00	х						0	0	0	
ANDREW BREGENZER DIRECTOR	1.00	Х						0	0	0	
ANISH MELWANI DIRECTOR	1.00	Х						0	0	0	
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DIRECTOR
ANISH MELWANI
DIRECTOR
BERNICE CLARK

DIRECTOR

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DIRECTOR

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DIRECTOR

DIRECTOR

CHARLES WANG

CHRISTINE FENSKE

CHRISTOPHER JAMES

**BRAD A ROTHBAUM** 

**BRENDAN DOUGHER** 

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

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	for related organizations below dotted line)	Individual trustee or director	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	х						0	0	0	
DENISE PICKETT DIRECTOR & VICE CHAIR	1.00	X		х				0	0	0	
DIPTI S GULATI DIRECTOR	1.00	х						0	0	0	
DONALD DONAHUE DIRECTOR & CO-CHAIR	1.00	Х		х				0	0	0	
ELLY KEINAN DIRECTOR	1.00	х						0	0	0	
EVAN KAUFMAN	1.00										

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ELLY KEINAN
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EVAN KAUFMAN
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FELIX MATOS RODRIGUEZ

HEDIEH FAKHRIYAZDI

ISIDORE MAYROCK

J EMILLO CARILLO

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEAN-CLAUDE GRUFFAT DIRECTOR	1.00	X						0	0	0	
JEFFREY SHERMAN DIRECTOR	1.00							0	0	0	
JENNIFER PIEPSZAK DIRECTOR	1.00	X						0	0	0	
JENNIFER WARREN DIRECTOR	1.00							0	0	0	
JOSEPH CARREDA	1.00	.[					$\bigcap$	,	· '		

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DIRECTOR
JENNIFER WARREN
DIRECTOR
JOSEPH CABRERA

**DIRECTOR & VICE-CHAIR** 

JOSHUA B MASON

KARYN L TWARONITE

KATHRYN KAMINSKY

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

KEVIN STONE

LARRY KLANE

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

	any hours					ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LIAM O'NEIL DIRECTOR (OUTGOING)	1.00	Х						0	0	0	
LISA CARNOY DIRECTOR	1.00	Х						0	0	0	
LORRAINE M LYNCH DIRECTOR	1.00	Х						0	0	0	
MARIANNA D COOPER DIRECTOR	1.00	Х						0	0	0	

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EORIGINE II EINCH
DIRECTOR
MARIANNA D COOPER
DIRECTOR
MICHEAL SCHMIDTBERGER

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DIRECTOR & CO-CHAIR

NEIL MASTERSON

RANDALL KESSLER

ROBERT FRIEDMAN

**DIRECTOR & TREASURER** 

REV DR EMMA JORDAN-SIMPSON

DIRECTOR

PAUL PAPAS

DIRECTOR

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ROBERT MULLEN DIRECTOR	1.00	X						0	0	0	
ROBYN ZIVIC DIRECTOR	1.00	X						0	0	0	
ROSSIE EMMITT TURMAN III DIRECTOR	1.00	X						o	0	0	
STEPGEN J DANNHAUSER DIRECTOR	1.00	X				I		o	0	0	
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TED MOUDIS

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TROY YOUNG

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TODD SCHWARTZ

**DIRECTOR & SECRETARY** 

TRACY GAVEN-BRIDGMAN

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Average Reportable Estimated than one box, unless hours per compensation 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

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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	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
SHEENA WRIGHT PRESIDENT, CEO	45.00			х				419,032	0	38,082
TOM GUILTINAN TEMPORARY CFO	20.00			х				0	0	0
JACQUELINE JENKINS SVP, CHIEF TRANSF. OFFICER	45.00				х			185,304	0	36,049
LESLEIGH IRISH-UNDERWOOD  VP, CHIEF MARKETING OFF	45.00				х			221,245	0	6,600
FICHAKEEM MCCLARY	45.00									

EICHAKEEM MCCLARY SVP, CHIEF LEGAL AND ADMIN

MARIELYS DIVANNE

VP, EDUCATION

MEGHAN BROWN

VICE PRESIDENT

VICTOR MILLSAP

SVP, CHIEF DEVELOP. OFFICE

MICHELLE M GONZALES MATHESON

VP, INFORMATION TECHNOLOGY

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SCI	HED	ULE A	- Dublic (	Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	· a section	2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza OF NEW YORK					Employer identific	ation number
							13-2617681	
	rt I		for Public Charity State a private foundation because				See instructions.	
1 1	rganiz		onvention of churches, or as	•	-		(A)(i)	
2		•	ŕ					
			escribed in section 170(b)(		,	, ,		
3		·	or a cooperative hospital serv	-			-	. k kla la
4	Ш	name, city,	esearch organization operate and state:	ed in conjunction with	a nospital descri	ibed in <b>section</b> :	1/U(b)(1)(A)(III). E	nter the hospital's
5			ation operated for the benefit (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>
6		A federal, s	state, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).	
7	✓		ation that normally receives a <b>'0(b)(1)(A)(vi).</b> (Complete		s support from a	governmental u	nit or from the gener	al public described in
8			ty trust described in <b>section</b>	•	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. So					ege or university or a
10		from activit investment	ation that normally receives: ties related to its exempt fun income and unrelated busin See <b>section 509(a)(2).</b> (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations on through 12d that describes	lescribed in <b>section 5</b>	09(a)(1) or sec	ction 509(a)(2	). See <b>section 509(</b> a	
a		<b>Type I.</b> A so	supporting organization oper n(s) the power to regularly a <b>Part IV, Sections A and B.</b>	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar			• • • • • • • • • • • • • • • • • • • •	_
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n	non-functionally integrated integrated integrated. The organization in the complete Par	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization received Type III non-functionally	ed a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter				-		<u> </u>	
g	Provi	de the follow	ring information about the su	pported organization(	r '			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota		l. P. '	tion Act Notice, see the Ir		Cat. No. 11285		8-1	 90 or 990-EZ) 2019

If the organization failed to qualify under the tests listed below, please complete Part III.)

	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	61,875,439	61,565,929	59,973,152	53,752,423	59,900,733	297,067,676
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 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	61,875,439	61,565,929	59,973,152	53,752,423	59,900,733	297,067,676
6	(f) <b>Public support.</b> Subtract line 5 from line 4.						297,067,676
S	ection B. Total Support	'		'	,	1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	61,875,439	61,565,929	59,973,152	53,752,423	59,900,733	297,067,676
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	267,684	243,748	148,135	160,889	235,423	1,055,879
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	521,616	843,249	470,844	548,057	412,408	2,796,174
11	<b>Total support.</b> Add lines 7 through 10						300,919,729
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	729,389
13	First five years. If the Form 990 is for	or the organization	s first, second, th	rd, fourth, or fifth	tax year as a sec	tion 501(c)(3) orga	nization,
	check this box and <b>stop here</b>					▶ 🗆	
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) d	ivided by line 11, o	olumn (f))		14	98.720 %
15	Public support percentage for 2018 Sc					15	98.670 %
<b>16</b> a	<b>33 1/3% support test—2019.</b> If the	e organization did i	not check the box	on line 13, and lin	e 14 is 33 1/3% or	more, check this b	_
b	and <b>stop here.</b> The organization qual <b>33 1/3% support test—2018.</b> If the	ne organization did	not check a box o	n line 13 or 16a, a	and line 15 is 33 1,	/3% or more, check	
<b>17</b> a	box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organization Part VI how the organization meets	t— <b>2019.</b> If the or on meets the "facts	ganization did not s-and-circumstance	check a box on lines" test, check this	ie 13, 16a, or 16b, s box and <b>stop he</b>	, and line 14 e <b>re.</b> Explain	. ▶ ⊔
b	organization	st— <b>2018.</b> If the o zation meets the "	rganization did not facts-and-circumst	check a box on li ances" test, check	ne 13, 16a, 16b, o this box and <b>sto</b> j	or 17a, and line p here.	▶□
18	supported organization						▶□
	instructions						▶□

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010		(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513  Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1	<del></del>			Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18   33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

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

10a

answer line 10b below.

the organization had excess business holdings).

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? 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. 3a 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? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

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 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

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

8 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

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
```

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

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

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

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
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 <b>Part VI</b> 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	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> 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 <b>Part VI</b> how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	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 <b>Part VI identify those supported organizations and explain</b> 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		
ı	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>b</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 <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O  Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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 Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
_		

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions	nich the organization is respon:	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
		110 2013	Allibalit for 2013
1 Distributable amount for 2019 from Section C, line 6		110 2015	Allount for 2013

details in <b>Part VI</b> ). See instructions		(	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			
e From 2018.			

Schedule A (Form 990 or 990-EZ) (2019)

f Total of lines 3a through e

instructions)

See instructions.

a Excess from 2015. . . . . **b** Excess from 2016. . . . . c Excess from 2017. . . . . **d** Excess from 2018. . . . . e Excess from 2019. . . . .

3j and 4c. 8 Breakdown of line 7:

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

Schedule A (Form 990 or 990-EZ) 2019 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 SCHEDULE A, PART II, LINE 10, OTHER REVENUE - 2015 AMOUNT: \$ 67,649. 2016 AMOUNT: \$ 366,362. 2017 AMOUNT: \$ 49,284. 2018 EXPLANATION OF OTHER AMOUNT: \$ 104,823. 2019 AMOUNT: \$ 31,572. FUNDRAISING INCOME - 2015 AMOUNT: \$ 453,967. 20 INCOME: 16 AMOUNT: \$ 476,887, 2017 AMOUNT: \$ 421,560, 2018 AMOUNT: \$ 351,150, 2019 AMOUNT: \$ 58,23 6. BOARD SERVE NYC - 2018 AMOUNT: \$ 3.073. FORGIVENESS OF DEBT - 2019 AMOUNT: \$ 290.542. U WW FLEX CREDIT - 2019 AMOUNT: \$ 32,058. 401K FORFEITURES - 2018 AMOUNT: \$ 89,011.

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# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

DLN: 93493133040531

Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (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.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

• Section 527 organizations: Complete Part I-A only.

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

	Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Par				
	Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete				
	e organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instruction (xy Tax) (see separate instructions), then	s) or Form 9	9U-EZ	., Part V, IIne	3 35C
	Section 501(c)(4), (5), or (6) organizations: Complete Part III.				
		Employer id	entif	ication num	her
	ITED WAY OF NEW YORK CITY	z.i.ipioye. ia		cation nan	
		13-2617681			
Par	t I-A Complete if the organization is exempt under section 501(c) or is a section	n 527 orgai	nizat	ion.	
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (so "political campaign activities")	ee instruction	s for	definition of	
2	Political campaign activity expenditures (see instructions)		\$_		
3	Volunteer hours for political campaign activities (see instructions)				
Par	rt I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	<b>&gt;</b>	\$_		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	<b>&gt;</b>	\$_		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	□ No
4a	Was a correction made?			☐ Yes	□ No
b	If "Yes," describe in Part IV.				
Par	rt I-C Complete if the organization is exempt under section 501(c), except section	on 501(c)(3	3).		
1	Enter the amount directly expended by the filing expaniantion for section E27 exempt function activities	25	4		

Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 🕨

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... 3

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? ☐ Yes

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

(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received filing organization's funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2 5

90,200

67,000

1,000,000

1.500.000

212,250

55,050

Schedule C (Form 990 or 990-EZ) 2019

Grassroots nontaxable amount

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

Grassroots lobbying expenditures

Grassroots ceiling amount

Return Reference

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)	(b)	)
ctivi		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
a	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				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	TO 1 CT 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5), o	r secti	on	
	,	)(5), o	r secti		. N
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).		r secti	Yes	s N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?		r secti	Yes	s N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		E	Yes	s N
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?		 	Yes 1 2 3	
'ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	 		Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	 		Yes 1 2 3 on 501(	
'ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	)(5), o		Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	)(5), o III-A		Yes 1 2 3 on 501(	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o III-A 1 2a 2b		Yes 1 2 3 on 501(	
ar ab	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	(5), o III-A 1 2a 2b 2c		Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b		Yes 1 2 3 on 501(	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A 1 2a 2b 2c 3		Yes 1 2 3 on 501(	
ar 2 3 ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A 1 2a 2b 2c		Yes 1 2 3 on 501(	

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493133040531

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization UNITED WAY OF NEW YORK CITY

(Form 990)

Part I

1

2

5

6

Part II

n 990)	► Supplemental Financial Statements  ► Complete if the organization answered "Yes," on Form 990,					2019		
tment of the Treasury	Part IV, line 6, 7, 8, 9, 10, ► Δ	11a, 11b, 11c, 11d, ttach to Form 990.	11e, 11f, 12a, or	12b.		Open to Public		
al Revenue Service	► Go to <u>www.irs.gov/Form99</u>		nd the latest infor	matio	n.	Inspection		
me of the organization				Employer identification number				
TED WAY OF NEW YOR	CCITY			13-2	2617681			
	tions Maintaining Donor Advised			r Acc	ounts.			
Complete	if the organization answered "Yes"							
		(a) Donor advis	sed funds		<b>(b)</b> Funds ar	nd other accounts		
	d of year							
55 5	contributions to (during year)				1,385,00			
Aggregate value of	grants from (during year)					1,091,93		
Aggregate value at	end of year					1,363,45		
organization's prop Did the organization charitable purpose	on inform all donors and donor advisors in perty, subject to the organization's exclusion inform all grantees, donors, and donors and not for the benefit of the donor or the conor or the	sive legal control? r advisors in writing th donor advisor, or for	nat grant funds can any other purpose c	 be use	ed only for	☑ Yes ☐ No		
	ition Easements. if the organization answered "Yes"	on Form 000 Part	IV line 7					
	ervation easements held by the organiza							
	, -							
	of land for public use (e.g., recreation or	reducation) $\square$	Preservation of an	histor	ically importa	ant land area		
☐ Protection of	natural habitat	Ш	Preservation of a c	ertifie	d historic stru	ucture		
☐ Preservation	of open space							
	through 2d if the organization held a qua	alified conservation co	ntribution in the for	m of a				
	ast day of the tax year.		ı	Į	Held at t	he End of the Year		
	nservation easements			2a 2b				
Total acreage restricted by conservation easements								
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				2d				
Number of conservertax year ►	/ation easements modified, transferred, r	released, extinguished	d, or terminated by t	he org	ganization du	ring the		
Number of states	where property subject to conservation e	asement is located <b>&gt;</b>						
	tion have a written policy regarding the policy reconservation easements it holds? .			of viola	· -	] vos □ No		

2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo	rm of a						
	easement on the last day of the tax year.	, ,	Held at the End of the Year					
а	Total number of conservation easements	2a						
b	Total acreage restricted by conservation easements	2b						
С	Number of conservation easements on a certified historic structure included in (a)	2c						
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶							
4	Number of states where property subject to conservation easement is located ▶							
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?							
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year							
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > \$							
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?							
9	— ··· — ···							
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Oth Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	ner Sir	nilar Assets.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.							
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:							
(	i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$					
<b>(</b> i								
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:							
а	Revenue included on Form 990, Part VIII, line 1							
b	Assets included in Form 990, Part X		<b>▶</b> \$					
For	Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No	52283	D Schedule D (Form 990) 2019					

d Equipment . . . .

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

Sche	dule D (	Form 990) 2019									Page <b>2</b>
Par	t III	Organizations M	aintaining Col	lections of Art,	Historical	Treas	ures, or	Other	Similar Asso	<b>ets</b> (cont	inued)
3		the organization's acq (check all that apply):		n, and other records	, check any	of the f	ollowing th	hat are a	significant use	of its col	lection
а		Public exhibition			d [	] Loa	n or excha	inge prog	rams		
b		Scholarly research			e [	] Oth	er				
C		Preservation for future	e generations								
4	Provide Part XI	e a description of the	organization's col	lections and explain	how they fu	rther tl	he organiz	ation's ex	empt purpose	in	
5	_	the year, did the org to be sold to raise fur			,				_	Yes	□ No
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			rm 990, Pa	rt IV,	line 9, or	reporte	d an amount	on Forn	n 990, Part
<b>1</b> a		organization an agent ed on Form 990, Part							_	Yes	☑ No
b	If "Yes	s," explain the arrange	ement in Part XIII	and complete the fo	ollowing tabl	۵٠	Г	1	Ame	ount	
c		ning balance			-		.	1c		June	
d	_	ons during the year .						1d			
е		utions during the year						1e			
f		j balance						1f			
2a	Did the	e organization include	an amount on Fo	rm 990. Part X. line	21. for escr	ow or c	ustodial a	ccount lia	bility? [	 □ Yes	
b		s," explain the arrange							· -	_	
	rt V	Endowment Fun		. Check here it the c	Apidilacion	143 500	ii provided	- III I GIC /	····	_	
		Complete if the or		vered "Yes" on Fo	rm 990, Pa	rt IV,	line 10.				
				(a) Current year	(b) Prior		<b>(c)</b> Two ye		(d) Three years		Four years back
	_	ng of year balance .		2,063,580	۷,۰	397,733		2,378,134	2,328	6,943	3,326,004
		utions		80,315		145,483		19,599	5	1,191	-999,061
		estment earnings, gair	·	00,515		143,403		15,555	3.	1,171	
		or scholarships									
	and pro	xpenditures for facilition		123,819		179,636					
		trative expenses .		2 020 076		VCD F00		2 207 722	2.27	2.424	2 226 042
g	•	ear balance		2,020,076		63,580		2,397,733	2,378	8,134	2,326,943
2		e the estimated perce	-	ent year end balance	e (line 1g, co	lumn (	a)) held as	s:			
а		designated or quasi-e									
b	Perma	nent endowment 🟲	100.000 %								
C	·	orarily restricted endo	***************************************								
3а	Are the	ercentages on lines 2a ere endowment funds zation by:		•	tion that are	held a	nd admini	stered for	the		Yes No
	-	related organizations								3a(i)	No No
		lated organizations								3a(ii)	
b	. ,	" on 3a(ii), are the re			on Schedule	R? .				3b	
4	Descri	be in Part XIII the inte	ended uses of the	organization's endo	wment fund	s					
Pa	rt VI	Land, Buildings,							000 -		
	Decerio	Complete if the or	ganization answ (a) Cost or oth		rm 990, Pa t or other basi				m 990, Part		O. look value
	Descrip	tion of property	(investme		con outer pasi	ouiei,	, (c) Acce	amulateu u	CPI ECIGUOTI	(u) b	ook value
1-	Land .										
		  S					+				
		old improvements			c	,086,41	4		2,656,967		6,429,447
_			1	1	-	, . =	1		., ,		., .=-,

148,371

91,601

6,521,048

56,770

Part VII Investments—Other Securities.  Complete if the organization answered "Yes" on Form S  (a) Description of security or category  (including name of security)	990, Part I\ (b Boo	) ok		d of valuatio	n:
(1) Financial derivatives					
(2) Closely-held equity interests	_				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII  Investments—Program Related.  Complete if the organization answered 'Yes' on Form 9  (a) Description of investment	▶ 990, Part I\	/, line 11c	:. See Form 990,	(c) Meth	od of valuation:
				Cost or en	d-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 9  (a) Description	90, Part IV	, line 11d	. See Form 990, Par		b) Book value
(1)					b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)				<b>•</b>	
Part X Other Liabilities.				<u> </u>	
Complete if the organization answered 'Yes' on Form 9  1. (a) Description of liability		, iine 11e	or 11f.See Form	(b) Book	., iine 25.
(1) Federal income taxes				value	
(2) CAMPAIGN DONOR DESIGNATIONS PAYABLE				766,754	
(3) PENSION AND POSTRETIREMENT OBLIGATION (4) DEFERRED RENT				3,782,413 624,734	
(5)				,	
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)			<b>•</b>	5,173,901	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo	ootnote to th	e organizat			eports the organization's

2

а

b

3

4

5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Part XII

Schedule D (Form 990) 2019

Page 4

-13,251,608

60,504,568

-247,476

60,257,092

44,008,146

348,261

43,659,885

13,514,501

57.174.386

Schedule D (Form 990) 2019

### 2c d Other (Describe in Part XIII.) 2d -13,477,857 e

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.

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

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

172.327

53.922

53,922

294,339

46,863

13,467,638

2e

3

4c

2e

3

4c

5

Subtract line **2e** from line **1** . . . . . . . . . Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . b Add lines **4a** and **4b** . . . . . . . . C

Total expenses and losses per audited financial statements . . . . . .

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

Subtract line 2e from line 1 . . . . . . . .

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

Supplemental Information

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 . . .

Donated services and use of facilities . .

Prior year adjustments . . . . . .

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . .

4a 4b

2a

2b

2a

2b

2c

2d

4a

4b

Explanation

46,863 -294,339 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

chedule D (Form 990) 2019	Page <b>5</b>
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

### **Additional Data**

SOURCE OF INCOME.

Name: UNITED WAY OF NEW YORK CITY

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

Supplemental	Informatio
Return R	eference

PART V, LINE 4:

Explanation

**EIN:** 13-2617681

Software ID: **Software Version:** 

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	UWNYC BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2020 AND 2019 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 -12,809,018. PROVISION FOR BAD DEBT -615,533. INDIRECT FUNDRASING EXPEN SES -43,087. CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST -10,219.

Supplemental Information						
Return Reference	Explanation					
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSES -294,339.					

Supplemental Information							
Return Reference	Explanation						
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES 294,339.						

Supplemental Information Return Reference Explanation INDIRECT FUNDRASING EXPENSES 43,087. DONOR DESIGNATIONS 12,809,018. PROVISION FOR BAD DEBT PART XII, LINE 4B - OTHER **1** 615,533. I ADJUSTMENTS:

**SCHEDULE G** 

(Form 990 or 990-EZ)

Department of the Treasury

DLN: 93493133040531

OMB No. 1545-0047

# **Supplemental Information Regarding** Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

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

► Attach to Form 990 or Form 990-EZ.

Open to Public

Inten	nal Revenue Service	►Go to www.i	rs.gov/Fo		Inspection			
	ne of the organization TED WAY OF NEW YORK CITY						Employer ide	ntification number
							13-2617681	
Pa	Fundraising Activ Form 990-EZ filers	·	_		answered "Yes" on Fo part.	rm 990,	Part IV, line 1	.7.
1	Indicate whether the organiz	ation raised funds th	rough an	y of the fo	llowing activities. Check	all that ap	ply.	
а	✓ Mail solicitations			e	✓ Solicitation of non-	governm	ent grants	
b	✓ Internet and email solicit	ations		f	rnment g	t grants		
c	✓ Phone solicitations			g	✓ Special fundraising	events		
d	✓ In-person solicitations							
2a	Did the organization have a vorkey employees listed in Fo							es 🗌 No
b	If "Yes," list the 10 highest p to be compensated at least \$			ndraisers)	pursuant to agreements ι	under whi		
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust con	i) Did iser have ody or trol of butions?	(iv) Gross receipts from activity	or re fundra	nount paid to etained by) iser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	SMK EVENT SOLUTIONS LLC 1441 BROADWAY SUITE 5001	GRIDIRON GALA	Yes	No	1,085,750		63,750	1,022,00
	NEW YORK, NY 10018  GLOW GLOBAL EVENTS 575 5TH AVE 14TH FLOOR  NEW YORK, NY 10017	WOMENS UNITED LUNCHEON	Yes		975,352		74,000	901,35
_								
Tota	al			.▶	2,061,102		137,750	1,923,35
3	List all states in which the orga	nization is registered	or licens	sed to soli	cit contributions or has be	een notifi	ed it is exempt f	rom registration or

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

licensing.

	rt II Fundraising Events. Comple	ete if the organization a	answered "Yes" on For	m 990, Part IV, line 18	Page <b>2</b> 3, or reported more
	than \$15,000 of fundraising e gross receipts greater than \$	event contributions and			
	gross receipts greater than \$	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events
		WLC LUNCHEON			(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
a)					
Ĕ					
Revenue					
~					
	1 Gross receipts	975,352			975,352
	2 Less: Contributions	917,116			917,116
	3 Gross income (line 1 minus				
	line 2)	58,236			58,236
	4 Cash prizes				
S	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment	37,996			37,996
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4	through 9 in column (d)			37,996
	11 Net income summary. Subtract line 10	) from line 3. column (d)			20,240
Pai	rt IIII Gaming. Complete if the org		s" on Form 990, Part I		
	on Form 990-EZ, line 6a.				
ЖIе		(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue			biligo, progressive biligo		con(a) through con(c))
ž	<b>1</b> Gross revenue				
es	- Cash sains				
Ø.					
Sens	2 Cash prizes				
Expen	3 Noncash prizes				
ed Expen					
Direct Expense	3 Noncash prizes				
Direct Expen	3 Noncash prizes	Voc. 96	□ Vac 96	□ Voc 9/6	
Direct Expen	3 Noncash prizes	☐ Yes %	☐ Yes %	☐ Yes %.	
Direct Expen	3 Noncash prizes	☐ Yes%	☐ Yes <u>%</u>	☐ Yes % ☐ No	
Direct Expen	3 Noncash prizes	□ No		l <u> </u>	
Direct Expen	3 Noncash prizes	No	□ No	□ No ►	
Direct Expen	3 Noncash prizes	through 5 in column (d)	No	□ No ►	
9	3 Noncash prizes	through 5 in column (d)  It line 7 from line 1, colum  ion conducts gaming activi	<b>No</b>	□ No ▶ ▶	
9 a	3 Noncash prizes	through 5 in column (d)  It line 7 from line 1, colum  ion conducts gaming activi aming activities in each of	No    • No • • • • • • • • • • • • • • • • • • •	□ No ▶ ▶	☐ Yes ☐ No
9	3 Noncash prizes	through 5 in column (d)  It line 7 from line 1, colum  ion conducts gaming activi aming activities in each of	No  n (d)	No	
9 a b	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, column  ion conducts gaming activities in each of	No  n (d)	No	
9 a b	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, column ion conducts gaming activities in each of	No  n (d)	No	
9 a b	3 Noncash prizes	through 5 in column (d)  thine 7 from line 1, column ion conducts gaming activities in each of	No  n (d)	No	

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age <b>3</b>				
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио					
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes						
13	Indicate the percentage of gam	ning activity conducted in:									
а	The organization's facility .			13a			%				
b	An outside facility			13b			%				
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:							
	Name •										
	Address >										
15a			m the organization receives gaming		·   Yes	Пио					
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the							
c	If "Yes," enter name and addre	ss of the third party:									
	Name •										
	Address ▶										
16	Gaming manager information:										
	Name ▶										
	Gaming manager compensation ▶ \$										
	Description of services provided	d ▶									
	☐ Director/officer	☐ Employee	☐ Independent contractor								
17	Mandatory distributions:										
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио					
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3						
		pt activities during the tax year									
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.				
	Return Reference		Explanation								

efile GRAPHIC print - DO NOT PROCESS As Filed Data 
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

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

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

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

DLN: 93493133040531

Open to Public Inspection

nternal Revenue Service   ame of the organization						Employer identific	antian mumban
INITED WAY OF NEW YORK CITY	,					13-2617681	ation number
Part I General Inform	ation on Grants	and Assistance				13-261/661	
1 Does the organization mair			the grants or assistance	the grantees' eligibility	for the grants or assistance	 re_and	
the selection criteria used t						c, and	☑ Yes 🗆 N
Describe in Part IV the organic	'						
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
<ul><li>Enter total number of secti</li><li>Enter total number of othe</li></ul>							112 27
						<del></del>	

(Form 990)

Department of the

Treasury

(2)

(3)

(4)

(5)

(6)

(7)

Part IV

PART I, LINE 2:

Return Reference

SCHEDULE I, PART II

(1) CHANGE CAPITAL FUND

(2) FOOD ASSISTANCE COLLABORATIVE

Schedule I (Form 990) 2019

Part III can be duplicated if additional space is needed.

Explanation

PROGRAM SITES AND PROVIDE FEEDBACK.

WINDFLOWER FARM AND ZAP CONSULTANT LLC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(c) Amount of

cash grant

148.787

129,402

(d) Amount of

noncash assistance

AS PART OF THE PROCESS OF MONITORING THE COMMUNITY BASED ORGANIZATIONS THAT UWNYC FUNDS, UWNYC REQUIRES A DETAILED BUDGET TO IDENTIFY

HOW THE AGENCY INTENDS TO SPEND THE CONTRACT AWARD AND AN EXPENDITURE REPORT TO SUBSTANTIATE THE AMOUNT REOUESTED FOR PAYMENT. UWNYC IALSO 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 ATAPE GROUP, LLC, BALER SALES COMPANY, INC., BENTZ'S FOOD PRODUCTS, INC., CRANBERRY HALL FARM, DAVID ELLIOT POULTRY FARM, INC., DRISCOLL FOODS, FRONT STREAM LLC, GONZALEZ FARM, HEARTY ROOTS FARM, NEW YORK PACKAGING II, LLC., NFOCUS SOLUTIONS, RACE EQUITY, LLC., RED APPLE FRUIT, SHABBOS FISH MARKET, SINGER NY, LLC., STONELEDGE FAR, LLC., TECHBRIDGE, INC., THE FARM AT MILLER'S CROSSING,

(e) Method of valuation (book,

FMV, appraisal, other)

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

Page 2

(f) Description of noncash assistance

Schedule I (Form 990) 2019

Software ID: **Software Version:** 

**EIN:** 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990,Schedule I, Part  (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
ACTS COMMUNITY DEVELOPMENT CORP 1034 66TH AVE OAKLAND, CA 94621	10-0003552	501(C)3	20,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
AFTER SCHOOL ALL STARS OF NYC 800 UTOPIA PKWY JAMAICA, NY 10018	11-3306766	501(C)3	422,550				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (c) IRC section (d) Amount of cash (e) Amount of non-(a) Name and address of (b) EIN (f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant cash or government assistance other) ARIVA INC 32-0028598 501(C)3 12,500 COVID-19 FUND-THE 69 EAST 167TH ST 2ND COVID-19 COMMUNITY BRONX, NY 10452 FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS. ASIAN & HISPANIC TRADING & 81-1361549 501(C)3 9.747 FOOD SUPPORT CONSULTING INC CONNECT (FSC) -FSC 37 W 39TH ST **FACILITATES AND** IMPROVES NYC NEW YORK, NY 10018 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.

(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 organization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) ATAPE GROUP LLC 46-1739670 464,024 READNYC- READNYC IS 555 KAPPOCK STREET A COMPREHENSIVE, BRONX, NY 10463 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. BALTER SALES COMPANY INC 13-1911598 43.983 HUNGER PREVENTION 209 BOWERY NUTRITION NEW YORK, NY 10002 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.

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
BANANA KELLY COMMUNITY IMPROVEMENT ASSOCIATION 863 PROSPECT AVE BRONX, NY 10549	13-2934000	501(C)3	106,500				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.
BEDFORD-STUYVESANT RESTORATION CORP 1368 FULTON ST BROOKLYN, NY 11216	11-6083182	501(C)3	80,000				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 Organizat	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
BEDFORD-STUYVESANT RESTORATION CORP 1368 FULTON ST BROOKLYN, NY 11216	11-6083182	501(C)3	148,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
BENZ'S FOOD PRODUCTS INCORPORATED 332 ALBANY AVENUE BROOKLYN, NY 11213	11-2841450		45,910				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 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
BIRCH FAMILY SERVICES INC 104 WEST 29TH ST 3RD FLOOR NEW YORK, NY 10001	11-2503193	501(C)3	20,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
BKLYN RESCUEMISSION URBAN HARV 255 BAINBRIDGE ST BROOKLYN, NY 11233	32-0019367	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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	<b>(c)</b> 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
BNAI RAPHAEL CHESED ORG 1741 MCDONALD AVE BROOKLYN, NY 11230	22-3884890	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
BRIDGE STREET DEVELOPMENT CORP 460 NOSTRAND AVE BROOKLYN, NY 11216	11-3250772	501(C)3	25,000				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 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		
BRONX JEWISH COMMUNITY COUNCIL 2930 WALLACE AVENUE BRONX, NY 10467	13-2744533	501(C)3	45,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		
BRONXWORKS 60 EAST TREMONT AVE BRONX, NY 10453	13-3254484	501(C)3	715,194				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
BRONXWORKS 60 EAST TREMONT AVE BRONX, NY 10453	13-3254484	501(C)3	75,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
CALVARY'S MISSION 12418 116TH AVE S OZONE PARK, NY 11420	11-3780620	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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	
CAMBA 1720 CHURCH AVENUE 2ND FL BROOKLYN, NY 11226	11-2480339	501(C)3	287,104				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) -UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.	
CATCHAFIRE INC 1885 MISSION STREET D3 SAN FRANCISCO, CA 94103	27-0649371	501(C)3	75,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.	

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
CATCHAFIRE INC 1885 MISSION STREET D3 SAN FRANCISCO, CA 94103	27-0649371	501(C)3	75,000				CENSUS- CENSUS IS THE LARGEST MOBILIZATION AND OPERATION CONDUCTED IN THE US, IT REQUIRES YEARS OF RESEARCH, PLANNING, AND DEVELOPMENT OF METHODS AND INFRASTRUTURE TO ENSURE AN ACCURATE AND COMPLETE COUNT. CENSUS WILL HELP ENSURE THAT NEW YORK STATE GETS ITS FAIR SHARE OF RESPRESENTATION IN CONGRESS AND FEDERAL DOLLARS, WHICH HELP TO IMPROVE OUR NEIGHBORHOODS, AND SUPPORT THE COMMUNITIES WE SERVE AT UNITED WAY OF NYC.
CATHOLIC CHARITIES COMMUNITY SERVICES ARCHDIOCESE OF NY 1011 FIRST AVENUE NEW YORK, NY 10022	13-5562184	501(C)3	459,760				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		
CDW DIRECT LLC 300 N MILWAUKEE AVENUE VERNON HILLS, IL 60061	36-3310735	501(C)3	94,254				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		
CENTER FOR SUPPORTIVE SCHOOLS 461 GRAND STREET BROOKLYN, NY 11211	22-2962532	501(C)3	804,212				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
CHINESE-AMERICAN PLANNING COUNCIL INC 150 ELIZABETH ST NEW YORK, NY 10012	13-6202692	501(C)3	32,003				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.
CHINESE-AMERICAN PLANNING COUNCIL INC 150 ELIZABETH ST NEW YORK, NY 10012	13-6202692	501(C)3	50,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organizat	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
CHRIST DISCIPLES INT'L MINISTRIES INC 399 E MOSHOLU PKWY N BRONX, NY 10467	20-8144855	501(C)3	50,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
CHURCH OF THE HOLY APSTLES SOUP KITCHEN 296 NINTH AVE NEW YORK, NY 10001	13-2892297	501(C)3	6,579				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. (c) IRC section (e) Amount of non-(a) Name and address of (b) EIN (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant cash other) or government assistance COMMUNITY FOOD 27-1764219 501(C)3 15,000 COVID-19 FUND-THE **ADVOCATES** COVID-19 COMMUNITY 110 WALL STREET FUND WILL PROVIDE NEW YORK, NY 10005 RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS. COMMUNITY HEALTH ACTION 13-3556132 501(C)3 26,421 FOOD SUPPORT OF STATEN ISLAND INC CONNECT (FSC) -FSC 56 BAY STREET **FACILITATES AND** IMPROVES NYC STATEN ISLAND, NY 10301 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 Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> 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	
COMMUNITY HEALTH ACTION OF STATEN ISLAND INC 56 BAY STREET STATEN ISLAND, NY 10301	13-3556132	501(C)3	60,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.	
COMMUNITY SERVICES HDC 1474 EASTERN PARKWAY BROOKLYN, NY 11233	11-2598992	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.	

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
CONEY ISLAND ANTI- VIOLENCE COL 1718 MERMAID AVE BROOKLYN, NY 11224	81-2488827	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
CORONA SDA CHURCH 35-30 103RD ST CORONA, NY 11368	03-0511915	501(C)3	12,500				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (c) IRC section (e) Amount of non-(a) Name and address of (b) EIN (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant cash or government assistance other) COUNCIL OF THE PEOPLE 75-3046891 501(C)3 70,000 COVID-19 FUND-THE ORGANIZATION COVID-19 COMMUNITY 1081 CONEY ISLAND FUND WILL PROVIDE BROOKLYN, NY 11230 RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS. COUNCIL OF THE PEOPLE 75-3046891 501(C)3 23,360 FOOD SUPPORT ORGANIZATION CONNECT (FSC) -FSC 1081 CONEY ISLAND AVE **FACILITATES AND** IMPROVES NYC BROOKLYN, NY 11230 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	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
COUNSELING IN SCHOOLS INC 65 WEST 95TH ST STE 7C NEW YORK, NY 10025	13-3637647	501(C)3	610,188				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.
CRANBERRY HALL FARM PO BOX 237 COOKSTOWN, NJ 08551	22-2897065		76,128				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
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION 1633 CENTRE ST BROOKLYN, NY 11208	11-2683663	501(C)3	238,531				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.
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION 1633 CENTRE ST BROOKLYN, NY 11208	11-2683663	501(C)3	45,500				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
DAVID ELLIOT POULTRY FARM 300 BRECK ST SCRANTON, PA 18505	24-0835679		36,485				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.
DIASPORA COMMUNITY SERVICES 921 E NY AVE BUILDING B BROOKLYN, NY 11203	11-3122295	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) DOLLYWOOD FOUNDATION 62-1348105 501(C)3 84.972 READNYC- READNYC IS 111 DOLLYWOOD LANE A COMPREHENSIVE, PIGEON FORGE, TN 37863 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.

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

DRISCOLL FOODS
174 DELAWANNA AVE
CLIFTON, NJ 07014

22-3482240

45,158

READNYC- READNYC IS
A COMPREHENSIVE,
ALIGNED, AND
COLLECTIVE STRATEGY
TO SUPPORT
CHILDREN, FAMILIES,
AND COMMUNITIES
WITH RESOURCES TO
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

(b) EIN (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (a) Name and address of (c) IRC section (f) Method of valuation organization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) DRISCOLL FOODS 22-3482240 3,475,804 HUNGER PREVENTION NUTRITION 174 DELAWANNA AVE CLIFTON, NJ 07014 ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS ÈNSURÉ 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.

22-3482240 42,104 DRISCOLL FOODS FOOD ASSISTANCE 174 DELAWANNA AVE COLLABORATIVE - THE CLIFTON, NJ 07014 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.										
(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			
DRISCOLL FOODS 174 DELAWANNA AVE CLIFTON, NJ 07014	22-3482240		78,465				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.			
EAST SIDE HOUSE SETTLEMENT INC 337 ALEXANDER AVE BRONX, NY 10454	13-1623989	501(C)3	1,373,077				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.			

(d) Amount of cash (g) Description of (b) EIN (c) IRC section (e) Amount of non-(h) Purpose of grant (a) Name and address of (f) Method of valuation (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant cash or government assistance other) EAST SIDE HOUSE 13-1623989 501(C)3 463,175 ATTENDANCE **IMPROVEMENT** SETTLEMENT INC 337 ALEXANDER AVE DROPOUT PREVENTION BRONX, NY 10454 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.

75.000

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.

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

501(C)3

13-1623989

EAST SIDE HOUSE INC 337 ALEXANDER AVE
BRONX, NY 10454

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		
EL-PUENTE 211 SOUTH 4TH STREET BROOKLYN, NY 11211	11-2614265	501(C)3	424,138				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.		
EQUITY ADVOCATES INC 495A HENRY ST BROOKLYN, NY 11321	82-3885723	501(C)3	10,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

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			
EXPANDED SCHOOLS (TASC) DBATH 11 W 42ND ST FRNT 3 NEW YORK, NY 10036	13-4004600	501(C)3	20,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.			
FAMILY HEALTH INTERNATIONAL 71 5TH AVENUE NEW YORK, NY 10003	23-7413005	501(C)3	587,008				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	c 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
FIFTH AVENUE COMMITTEE 621 DEGRAW ST BROOKLYN, NY 11217	11-2475743	501(C)3	31,000				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.
FRONT STREAM LLC 11480 COMMERCE PARK DR STE 300 RESTON, VA 20191	38-3913855		12,809,018				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)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (b) EIN (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant (a) Name and address of (c) IRC section (e) Amount of nonorganization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) 11-2656137 501(C)3 200,000 READNYC- READNYC IS FUND FOR PUBLIC SCHOOLS A COMPREHENSIVE, 52 CHAMBER STREET ROOM 305 ALIGNED, AND NEW YORK, NY 10007 COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE. GENERATION CITIZEN 27-2039522 501(C)3 34,884 CENSUS- CENSUS IS 110 WALL STREET 5TH FLOOR THE LARGEST NEW YORK, NY 10005 MOBILIZATION AND OPERATION CONDUCTED IN THE US, IT REQUIRES YEARS OF RESEARCH, PLANNING, AND DEVELOPMENT OF METHODS AND INFRASTRUTURE TO ENSURE AN ACCURATE AND COMPLETE COUNT. CENSUS WILL HELP ENSURE THAT NEW YORK STATE GETS ITS FAIR SHARE OF RESPRESENTATION IN CONGRESS AND FEDERAL DOLLARS, WHICH HELP TO IMPROVE OUR

NEIGHBORHOODS, AND SUPPORT THE COMMUNITIES WE SERVE AT UNITED WAY

OF NYC.

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			
GLOBAL KIDS INC 137 EAST 25TH STREET 2ND FLOOR NEW YORK, NY 10010	13-3629485	501(C)3	50,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.			
GLOBAL KIDS INC 137 EAST 25TH STREET 2ND FLOOR NEW YORK, NY 10010	13-3629485	501(C)3	844,316				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 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	232,150				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 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	971,963				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.		
GRACE EPISCOPAL CHURCH 1909 VYSE AVE BRONX, NY 10460	13-3055547	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

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	<b>(d)</b> 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
GRAND STREET SETTLEMENT 80 PITT STREET NEW YORK, NY 10002	13-5562230	501(C)3	430,682				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.
GROWNYC 51 CHAMERS STREET ROOM 228 NEW YORK, NY 10007	13-2765465	501(C)3	65,000				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.

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organizat	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
HARLEM DOWLING WESTSIDE CENTER FOR CHILDREN & FAMILIES 1 ECHO HL DOBBS FERRY, NY 10522	13-3030378	501(C)3	60,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
HEARTY ROOTS FARM PO BOX 277 TIVOLI, NY 12583	20-2925491		95,040				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.									
(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		
HESTER STREET COLLABORATIVE 113 HESTER ST NEW YORK, NY 10002	20-0774906	501(C)3	93,000				CENSUS- CENSUS IS THE LARGEST MOBILIZATION AND OPERATION CONDUCTED IN THE US, IT REQUIRES YEARS OF RESEARCH, PLANNING, AND DEVELOPMENT OF METHODS AND INFRASTRUTURE TO ENSURE AN ACCURATE AND COMPLETE COUNT. CENSUS WILL HELP ENSURE THAT NEW YORK STATE GETS ITS FAIR SHARE OF RESPRESENTATION IN CONGRESS AND FEDERAL DOLLARS, WHICH HELP TO IMPROVE OUR NEIGHBORHOODS, AND SUPPORT THE COMMUNITIES WE SERVE AT UNITED WAY OF NYC.		
HOT BREAD KITCHEN LTD 630 FLUSHING AVE NEW YORK, NY 11206	26-3332972	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

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
HUNGER FREE AMERICA 16 BEAVER ST 3RD FLOOR NEW YORK, NY 10004	13-3471350	501(C)3	145,573				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.
HUNGER FREE AMERICA 16 BEAVER ST 3RD FLOOR NEW YORK, NY 10004	13-3471350	501(C)3	70,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (g) Description of (book, FMV, appraisal, organization if applicable cash non-cash assistance or assistance grant other) or government assistance JEWISH SERVICE COALITION 11-4081036 501(C)3 15,000 COVID-19 FUND-THE 1525 CENTRAL AVENUE STE 2 COVID-19 COMMUNITY FAR ROCKAWAY, NY 11691 FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO DISPROPORTIONATELY TED BY NAVIRUS AND CONOMIC QUENCES OF JTBREAK. WE 10BILIZE OUR NETWORK OF 600 COMMUNITY-**PARTNERS** 

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

					DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
LIFT-NY 349 E 149TH STREET BRONX, NY 10451	52-2168409	501(C)3	14,445		READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A

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

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
LIFT-NY 349 E 149TH STREET BRONX, NY 10451	52-2168409	501(C)3	365,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
LITTLE FLOWER CHILDREN&FAMILY 2450 N WADING RIVER RD WADING RIVER, NY 11792	11-1633572	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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		
LUTHERAN SOCIAL SERVICES OF NY 475 RIVERSIDE DRIVE STE 1244 NEW YORK, NY 10115	45-2799940	501(C)3	10,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		
MAKE THE ROAD NY 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)3	768,865				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 PEFFORMING 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
MAKE THE ROAD NY 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)3	275,000				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.
MANNA OF LIFE MINISTRIES INC 2712 NW 23RD ST OKLAHOMA CITY, OK 73107	56-2370709	501(C)3	30,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990, Schedule I, Part	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		
MIXTECA ORGANIZATION INC 245 23RD STREET 2ND BROOKLYN, NY 11215	13-3561651	501(C)3	13,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		
NATIONAL COUNCIL OF JEWISH WOMENINC 70 S ORANGE AVE LIVINGSTON, NJ 07039	22-1687993	501(C)3	10,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

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
NEIGHBORS TOGETHER 2094 FULTON STREET BROOKLYN, NY 11233	11-2632109	501(C)3	45,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
NEW ALTERNATIVES FOR CHILDREN 37 WEST 26TH STREET NEW YORK, NY 10010	13-3149298	501(C)3	9,500				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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 COVENANT COMMUNITY DEVELOPMENT CORP 1175 BOSTON RD BRONX, NY 10456	13-4167577	501(C)3	50,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
NEW DIRECTION SERVICES 1027 POST AVE STATEN ISLAND, NY 10302	13-4118080	501(C)3	18,500				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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)	<b>(g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
NEW SETTLEMENT APARTMENT 1512 TOWNSEND AVE BRONX, NY 10452	14-1719016	501(C)3	25,000				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.
NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT 130 STUYVESANT PLACE STATEN ISLAND, NY 10301	23-7085239	501(C)3	1,741,945				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
NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVE 52 BROADWAY NEW YORK, NY 10004	46-1227433	501(C)3	626,915				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.
NEW YORK EDGE INC 5812 QUEENS BLVD WOODSIDE, NY 11377	11-3112635	501(C)3	136,547				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
NEW YORK EDGE INC 5812 QUEENS BLVD WOODSIDE, NY 11377	11-3112635	501(C)3	402,973				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
NEW YORK PACKAGING II LLC 135 FULTON AVE HYDE PARK, NY 11040	04-3834351		6,197				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
NFOCUS SOLUTIONS 6225 NORTH 24TH STREET GL PHOENIX, AZ 85016	74-2608234		9,515				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.
NONTRADITIONAL EMPLOYMENT FOR WOMEN 243 WEST 20TH STREET NEW YORK, NY 10011	13-3272001	501(C)3	17,500				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990, Schedule I, Part	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	<b>(c)</b> IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTHEAST BROOKLYN HOUSING DEVELOPMENT CORP 132 RALPH AVENUE BROOKLYN, NY 11233	11-2737223	501(C)3	20,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		
OPIN OTHER PEOPLE IN NEED 1768 SAINT JOHN PLACE BROOKLYN, NY 11233	75-3084335	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

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 organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) PART OF THE SOLUTION 13-3471350 501(C)3 152,500 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. PARTNERSHIP WITH CHILDREN 13-5596751 501(C)3 727,853 ATTENDANCE INC **IMPROVEMENT** 299 BROADWAY SUITE 1300 DROPOUT PREVENTION NEW YORK, NY 10007 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	
PATHWAYS TO LEADERSHIP 598 BROADWAY NEW YORK, NY 10012	38-3886413	501(C)3	771,763				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.	
PHIPPS COMMUNITY DEVELOPMENT CORPORATION 902 BROADWAY 13TH FLOOR NEW YORK, NY 10010	13-2707665	501(C)3	375,952				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	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRATT AREA COMMUNITY COUNCIL 1201 DEKALB AVE BROOKLYN, NY 11205	11-2451752	501(C)3	25,000				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.
QUEENS COMMUNITY HOUSE INC 10825 62ND DR FOREST HILLS, NY 11375	11-2375583	501(C)3	17,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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	
RACE EQUITY LLC 2237 BRISBANE WOODS CARY, NC 27518	83-1481691		41,018				CENSUS- CENSUS IS THE LARGEST MOBILIZATION AND OPERATION CONDUCTED IN THE US, IT REQUIRES YEARS OF RESEARCH, PLANNING, AND DEVELOPMENT OF METHODS AND INFRASTRUTURE TO ENSURE AN ACCURATE AND COMPLETE COUNT. CENSUS WILL HELP ENSURE THAT NEW YORK STATE GETS ITS FAIR SHARE OF RESPRESENTATION IN CONGRESS AND FEDERAL DOLLARS, WHICH HELP TO IMPROVE OUR NEIGHBORHOODS, AND SUPPORT THE COMMUNITIES WE SERVE AT UNITED WAY OF NYC.	
REACHING-OUT COMMUNITY SERVICE 7708 NEW UTRECHT AVE BROOKLYN, NY 11214	11-3615625	501(C)3	20,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.	

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (b) EIN (e) Amount of non-(a) Name and address of (c) IRC section (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant if applicable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance other) or government assistance 13-4091062 501(C)3 50,000 READ ALLIANCE COVID-19 FUND-THE 160 BROADWAY 8TH FLOOR COVID-19 COMMUNITY EAST FUND WILL PROVIDE

BUILDING NEW YORK, NY 10038					RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
READING PARTNERS 180 GRAND AVENUE SUITE 800 OAKLAND, CA 94612	77-0568469	501(C)3	175,000		READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO

BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

organization if applicable (book, FMV, appraisal, grant cash non-cash assistance or assistance or government assistance other) RED APPLE FRUIT AND 06-2607071 18,514 HUNGER PREVENTION **VEGETABLE** NUTRITION **455 ALBANY AVE** ASSISTANCE PROGRAM (HPNAP) - HPNAP HELPS BROOKLYN, NY 11213 ÈNSURÉ 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.

12,500

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

FOOD ASSISTANCE

COLLABORATIVE - THE

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

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

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

81-4730252

REDSTONE STRATEGY 3223 ARAPAHOE AVE STE BOULDER, CO 80303

(a) Name and address of

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
RISEBORO COMMUNITY PARTNERSHIP 217 WYCKOFF AVE BROOKLYN, NY 11237	11-2453853	501(C)3	75,054				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.
RISEBORO COMMUNITY PARTNERSHIP 217 WYCKOFF AVE BROOKLYN, NY 11237	11-2453853	501(C)3	50,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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	
SCAN-NEW YORK 245 E 87TH ST STE 11E NEW YORK, NY 10128	13-2912963	501(C)3	384,087				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.	
SCO FAMILY OF SERVICES 1 ALEXANDER PLACE GLEN COVE, NY 11542	11-2777066	501(C)3	290,596				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 or assistance grant cash or government assistance other) SHABBOS FISH MARKET 11-3180901 21,886 HUNGER PREVENTION 417 KINGSTON AVE NUTRITION BROOKLYN, NY 11225 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. 23-1674739 91,119 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.

SINGER NY LLC 1200 MADISON AVE PATERSON, NJ 07503

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
SISTERS WITH PURPOSE INC 908 ERSKINE ST BROOKLYN, NY 11239	27-2830778	501(C)3	15,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
SOUTH ASIAN COUNCIL FOR SOCIAL SERVICES 14306 45TH AVE FLUSHING, NY 02231	11-3632920	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

(book, FMV, appraisal, if applicable or assistance organization non-cash assistance grant cash other) or government assistance SPORTS & ARTS IN SCHOOLS 11-3112635 501(C)3 172,899 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 ICES IN CITYS

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

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.

(d) Amount of cash

(c) IRC section

(a) Name and address of

(b) EIN

					CALOPOST 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.
SPRINGBOARD COLLABORATIVE 1500 JFK BLVD PHILADELPHIA, PA 19102	43-3719806	501(C)3	30,000		READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY

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
ST NICKS ALLIANCE 2 KINGSLAND AVENUE 2ND BROOKLYN, NY 11211	51-0192170	501(C)3	374,620				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.
ST NICKS ALLIANCE 2 KINGSLAND AVENUE 2ND BROOKLYN, NY 11211	51-0192170	501(C)3	30,000				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		(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	373,768				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
TECHBRIDGE INC 100 PEACHTREE ST NW STE 2090 ATLANTA, GA 30303	58-2531971		52,200				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 BRIDGE FUND OF NEW YORK CITY 271 MADISON AVENUE 271 MADISON AVENUE SUITE 907 NEW YORK, NY 10016	13-3824852	501(C)3	70,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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
THE CAMPAIGN AGAINST HUNGER INC 2010 FULTON STREET BROOKLYN, NY 11233	20-0934854	501(C)3	75,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
THE CHILD CENTER OF NEW YORK 11835 QUEENS BOULEVARD FOREST FOREST HILLS, NY 11375	11-1733454	501(C)3	74,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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		
THE CHILDREN'S AID SOCIETY 105 E 22ND STREET NEW YORK, NY 10010	13-5562191	501(C)3	1,507,112				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.		
THE CHILDREN'S HEALTH FUND 215 WEST 125TH STREET SUITE 301 NEW YORK, NY 10027	13-3468427	501(C)3	75,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.		

(d) Amount of cash (b) EIN (e) Amount of non-(g) Description of (h) Purpose of grant (a) Name and address of (c) IRC section (f) Method of valuation (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant cash or government assistance other) THE CHILDREN'S VILLAGE 13-1739945 501(C)3 47,000 READNYC- READNYC IS ONE ECHO HILLS A COMPREHENSIVE, DOBB FERRY, NY 10522 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. 501(C)3 THE DOOR - A CENTER OF 13-6127348 287,587 ATTENDANCE **ALTERNATIVES IMPROVEMENT** 121 AVENUE OF THE DROPOUT PREVENTION **AMERICAS** SERVICES (AIDP) NEW YORK, NY 10013 -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 or assistance grant cash or government assistance other) THE DREAMYARD PROJECT INC 13-3759661 501(C)3 55,000 COVID-19 FUND-THE 1085 WASHINGTON AVENUE COVID-19 COMMUNITY BRONX, NY 10456 FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE

7,500

WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY

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.

TO PROVIDE
ASSISTANCE TO
FAMILIES TO WEATHER
THE COVID-19 CRISIS.
THIS NETWORK OF
COMMUNITY PARTNERS
WILL PROVIDE DIRECT
SERVICES THROUGH
OUR READNYC,
FEEDNYC AND
STRENGTHENNYC
PROGRAMS.

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

501(C)3

THE EAGLE ACADEMY

NEW YORK, NY 10027

31 WEST 125TH STREET 3RD

FOUNDATION

20-1532382

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 grant non-cash assistance or assistance cash or government assistance other) THE EAGLE ACADEMY 20-1532382 501(C)3 25,000 ADVOCATENYC-**FOUNDATION** ADVOCATENYC IS TO 31 WEST 125TH STREET 3RD MOBILIZE NETWORKS OF INDIVIDUALS AND NEW YORK, NY 10027 ORGANIZATIONS TO DRIVE SYSTEMS OF CHANGE THAT WILL ADVANCE SELFSUFFICIENCY AND EDUCATIONAL EQUITY FOR LOWINCOME NEW YORKERS. 13-5562210 501(C)3 309,452 ATTENDANCE THE EDUCATION ALLIANCE 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 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
THE EPSCOPAL ACTORS' GUILD OF AMERICA 1 E 29TH ST NEW YORK, NY 10016	13-5563397	501(C)3	35,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
THE FARM AT MILLER'S CROSSING 81 ROXBURY ROAD HUDSON, NY 12534	14-1811452		81,972				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 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
THE FORTUNE SOCIETY INC 29-76 NORTHERN BOULEVARD LONG ISLAND CITY, NY 11101	13-2645436	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
THE HETRICK-MARTIN INSTITUTE 2 ASTOR PLACE NEW YORK, NY 10003	13-3104537	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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
THE HOPE CENTER DEVELOPMENT CORP 409 E 95TH ST BROOKLYN, NY 11212	20-3249774	501(C)3	45,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
THE NEW YORK CENTER FOR CHILDREN 333 EAST 70TH STREET NEW YORK, NY 10021	95-4502444	501(C)3	45,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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
THE NEW YORK IMMIGRATION COALITION 131 WEST 33RD STREET SUITE 610 NEW YORK, NY 10001	13-3573409	501(C)3	100,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
THE NEW YORK URBAN LEAGUE 204 W 136TH ST NEW NEW YORK, NY 10030	13-1671035	501(C)3	200,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (a) Name and address of (f) Method of valuation organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) THE NEW YORK URBAN 13-1671035 501(C)3 25,000 ADVOCATENYC-LEAGUE ADVOCATENYC IS TO 204 W 136TH ST NEW MOBILIZE NETWORKS NEW YORK, NY 10030 OF INDIVIDUALS AND ORGANIZATIONS TO DRIVE SYSTEMS OF CHANGE THAT WILL ADVANCE SELFSUFFICIENCY AND **EDUCATIONAL EQUITY** FOR LOWINCOME NEW YORKERS. THE SALVATION ARMY OF 13-5562351 501(C)3 50,000 COVID-19 FUND-THE GREATER NEW YORK COVID-19 COMMUNITY 120 W 14TH STREET FUND WILL PROVIDE NEW YORK, NY 10011 RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK, WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND

STRENGTHENNYC PROGRAMS.

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
UNITED SERVICE ORGANIZATIONS 2111 WILSON BLVD SUITE ARLINGTON, VA 22201	13-1610451	501(C)3	25,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
UNIVERSITY COMMUNITY SOCIAL SERVICES INC 137 EAST 2ND ST NEW YORK, NY 10009	13-4043507	501(C)3	12,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

Form 990, Schedule I, Part	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
VERSE VIDEO EDUCATION 207 FISHER AVE BROOKLINE, MA 02445	81-0902953	501(C)3	67,250				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.
WEST HARLEM GROUP ASSISTANCE INC 1652 AMSTERDAM AVENUE NEW YORK, NY 10031	23-7169558	501(C)3	65,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.

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
WEST SIDE CAMPAIGN AGAINST HUNGER 263 WEST 86TH STREET NEW YORK, NY 10024	71-0908184	501(C)3	35,000				COVID-19 FUND-THE COVID-19 COMMUNITY FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY- BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO ARE DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY- BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS.
WINDFLOWER FARM 585 MEETING HOUSE ROAD VALLEY FALLS, NY 12185	52-2336178		114,048				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.

organization if applicable (book, FMV, appraisal, or assistance grant cash non-cash assistance or government assistance other) WOMEN IN NEED 13-3164477 501(C)3 15,000 COVID-19 FUND-THE 1 STATE STREET 18TH FL COVID-19 COMMUNITY NEW YORK, NY 10004 FUND WILL PROVIDE RESOURCES TO OUR PARTNER AGENCIES AND COMMUNITY-BASED ORGANIZATIONS THAT WORK WITH COMMUNITIES WHO DISPROPORTIONATELY IMPACTED BY CORONAVIRUS AND THE ECONOMIC CONSEQUENCES OF THE OUTBREAK. WE WILL MOBILIZE OUR BROAD NETWORK OF OVER 600 COMMUNITY-BASED PARTNERS THROUGHOUT THE CITY TO PROVIDE

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO

PROSPECTIVE BOARD

A POOL OF

MEMBERS.

ASSISTANCE TO FAMILIES TO WEATHER THE COVID-19 CRISIS. THIS NETWORK OF COMMUNITY PARTNERS WILL PROVIDE DIRECT SERVICES THROUGH OUR READNYC, FEEDNYC AND STRENGTHENNYC PROGRAMS. ZAP CONSULTANT LLC 45-1926285 16,700 BOARDSERVENYC -24 LEGRAND ROAD BOARD RECRUITMENT, NORTH HAVEN, CT 06743 TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF

(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

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49313	33040	531	
Sch	edule J	Co	ompensati	ion Information	0	MB No.	1545-0	0047	
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest							
		Compensated Employees  ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2019		
D	➤ Attach to Form 990.							blic	
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.go</u>	<u> </u>	mistructions and the latest miori		Insp	ectio	n	
	me of the organiza				Employer identifica	tion nu	ımber		
					13-2617681				
Pa	rt I Questi	ons Regarding Compensa	tion				I		
<b>1</b> a				the following to or for a person lister y relevant information regarding thes			Yes	No	
		, ,	III to provide air	,					
		or charter travel companions	H	Housing allowance or residence for payments for business use of person	•				
	_	nification and gross-up payments	s $\Box$	Health or social club dues or initiation					
		ary spending account		Personal services (e.g., maid, chauf					
	TC			6.11					
b				follow a written policy regarding pays ve? If "No," complete Part III to expla		1b			
2				or allowing expenses incurred by all		2			
	airectors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne la?				
3				ed to establish the compensation of the not check any boxes for methods	ne				
				CEO/Executive Director, but explain i	n Part III.				
	<b>✓</b> Compensa	ation committee		Written employment contract					
		ent compensation consultant	$\checkmark$	Compensation survey or study					
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee				
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a				
а	Receive a sever	ance payment or change-of-cont	trol payment? .			4a		No	
b	Participate in, o	r receive payment from, a suppl	emental nonquali	ified retirement plan?		4b		No	
С		' ' '	,	nsation arrangement? Dicable amounts for each item in Part		4c		No	
	ir res to any c	or lines 4a-c, list the persons and	a provide the app	olicable amounts for each item in Part	III.				
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.					
5		ed on Form 990, Part VII, Sectio ontingent on the revenues of:		the organization pay or accrue any					
а		1?				5a		No	
b		anization?				5b		No	
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any					
а	-	1?				6a		No	
b						<b>6</b> b		No	
7	•	6a or 6b, describe in Part III.	n A line to did t	the organization provide any nonfixed	d				
,				rt III		7		No	
8	subject to the in	nitial contract exception describe	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 					
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	8		No	
For F		iction Act Notice, see the Ins				9 I (Forn	1 990)	2019	

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	s (B)	ot list any individuals that o(i)-(iii) for each listed inc	are not listed on Form 9 dividual must equal the to	90, Part VII. otal amount of Form 990 <u>,</u>	Part VII, Section A, line	1a, applicable column (D)	and (E) amounts for tha	t individual.	
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC com  (i) Base (ii) Bonus & incentive compensation compensation		C compensation  (iii) Other reportable  (C) Retirement and other deferred compensation		( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior	
			compensation	compensation				Form 990	
1 SHEENA WRIGHT PRESIDENT, CEO	(i)	417,343	0	1,689	12,751	25,331	457,114	0	
	(ii)	0	0	0	0	0	0	0	
SVI, CHILLI HANSI.	(i)	184,835	0	469	5,881	30,168	221,353	0	
	(ii)	0	0	0	0	0	0	0	
3 LESLEIGH IRISH-	(i)	220,000	0	1,245	6,600	0	227,845	0	
UNDERWOOD VP, CHIEF MARKETING OFF	(ii)	0	0	0	0	0	0	0	
4 EICHAKEEM MCCLARY SVP, CHIEF LEGAL AND	(i)	175,145	0	420	5,400	15,123	196,088	0	
ADMIN	(ii)	0	0	0	0	0	0	0	
<b>5</b> MEGHAN BROWN SVP, CHIEF DEVELOP.	(i)	208,131	0	469	6,413	15,887	230,900	0	
OFFICE	(ii)	0	0	0	0	0	0	0	
6 MICHELLE M GONZALES	(i)	146,897	0	1,429	4,523	14,121	166,970	0	
MATHECON	(ii)	0	0	0	0	0	0	0	
7 VICTOR MILLSAP VP, INFORMATION	(i)	142,773	0	1,419	4,500	21,875	170,567	0	
TECHNOLOGY	(ii)	0	0	0	0	0	0	0	
							Schedule	J (Form 990) 2019	



efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493133040531 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶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** (c) (d) (a) (b) 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 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household . . . . . 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 2,700 LETTERS FROM VENDORS 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy . . . . . 21 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . . Χ 58,512 LETTERS FROM VENDORS 25 Other ► ( GIFT BAGS ) AUCTION 3.320 LETTERS FROM VENDORS 26 Other ▶ ( ITEMS 28 Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions 29 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 isn't 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 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
PART I, COLUMN (B):	THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS.
	Schedule M (Form 990) (2019)

efile GRAPH	I: 93493133040531					
SCHEDUL (Form 990 or EZ)	990-  Complete to provide information for responses to speci Form 990 or 990-EZ or to provide any additional in  Attach to Form 990 or 990-EZ.  ► Go to wave ire gov/Form 990 for the latest info	fic questions on nformation.	OMB No. 1545-0047  2019  Open to Public Inspection			
Name Setherofganization UNITED WAY OF NEW YORK CITY  13-261  990 Schedule O, Supplemental Information			tification number			
Return Reference	Explanation					
FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION DELEGATED CONTROL OVER MANAGEMENT DUTIES CUSTOMARILY PERFORMED BY OR UNDE R THE DIRECT SUPERVISION OF OFFICERS, DIRECTORS, TRUSTEES OR KEY EMPLOYEES TO FISCAL MANAG EMENT ASSOCIATES. FISCAL MANAGEMENT ASSOCIATES WAS COMPENSATED \$240,350 FOR THEIR SERVICES.					

Return Explanation
Reference

FORM 990,	THE 990 IS PREPARED BY AN INDEPENDENT ACCOUNTANT AND THEN REVIEWED WITH OUR AUDIT COMMITTE
PART VI,	E. ONCE APPROVED, THE 990 IS PROVIDED ELECTRONICALLY TO THE ENTIRE BOARD FOR ITS REVIEW AN
SECTION B,	D COMMENT AND THEN IT IS FILED WITH THE IRS.
LINE 11B	

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	UWNYC'S BOARD MEMBERS, OFFICERS, SENIOR EXECUTIVES AND CERTAIN OTHER DESIGNATED EMPLOYEES ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST DISCLOSURE STATEMENTS ANNUALLY AND HAVE AN 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 D ADDRESSED 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 COMPENSATI ON COMMITTEE DETERMINES THE REASONABLENESS OF THE CEO'S COMPENSATION BASED ON THIS INFORMA TION. 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.

Evolunation

## Return Explanation

990 Schedule O, Supplemental Information

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
TATION DIRECTLY

990 Schedule O, Supplemental Information

Return Explanation

Reference	
FORM 990,	CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUST -10,219. PENSION PLAN RELATED CH
PART XI,	ANGES OTHER THAN NET PERIODIC PENSION COST -746,367. POST-RETIREMENT LIFE INSURANCE PLAN R
LINE 9:	ELATED CHANGES -111,044.

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.