

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED WAY OF NEW YORK CITY		D Employer identification number 13-2617681
	Doing business as		E Telephone number 212-251-2431
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 72,077,947.
	205 EAST 42ND STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10017		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	H(c) Group exemption number ▶
F Name and address of principal officer: OSCAR RAPOSO SAME AS C ABOVE		If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.UNITEDWAYNYC.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1968 M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: UNITED WAY OF NEW YORK CITY UNIQUELY WORKS WITH BUSINESS, GOVERNMENT AND (SEE SCHEDULE O)		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	113
	6 Total number of volunteers (estimate if necessary)	6	2974
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 56,497,449.	Current Year 61,875,439.
	9 Program service revenue (Part VIII, line 2g)	485,483.	330,597.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	486,734.	433,978.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	67,649.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	57,469,666.	62,707,663.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	39,568,454.	46,230,581.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,493,924.	10,502,569.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	160,000.	226,750.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,035,751.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,080,163.	6,946,812.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	55,302,541.	63,906,712.
19 Revenue less expenses. Subtract line 18 from line 12	2,167,125.	-1,199,049.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 36,674,022.	End of Year 36,693,033.
	21 Total liabilities (Part X, line 26)	23,924,127.	27,602,315.
	22 Net assets or fund balances. Subtract line 21 from line 20	12,749,895.	9,090,718.

Part II Signature Block

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

Sign Here	Signature of officer <i>Oscar Raposo</i>	Date <i>5/12/17</i>			
	OSCAR RAPOSO, EVP & CFOO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ROBERT LYONS	Preparer's signature <i>Robert Lyons</i>	Date <i>5/12/17</i>	Check if self-employed <input type="checkbox"/>	PTIN P00227472
	Firm's name ▶ MARKS PANETH LLP	Firm's EIN ▶ 11-3518842			
	Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017		Phone no. 212-503-8800		

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

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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F Name and address of principal officer: OSCAR RAPOSO SAME AS C ABOVE		If "No," attach a list. (see instructions)		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: WWW.UNITEDWAYNYC.ORG				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1968	
M State of legal domicile: NY				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: UNITED WAY OF NEW YORK CITY UNIQUELY WORKS WITH BUSINESS, GOVERNMENT AND (SEE SCHEDULE O)		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
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	22 Net assets or fund balances. Subtract line 21 from line 20	12,749,895.	9,090,718.

Part II Signature Block

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

Sign Here	Signature of officer <i>Oscar Raposo</i>	Date 5/12/17			
	OSCAR RAPOSO, EVP & CFOO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ROBERT LYONS	Preparer's signature <i>Robert Lyons</i>	Date 5/12/17	Check if self-employed <input type="checkbox"/>	PTIN P00227472
	Firm's name MARKS PANETH LLP	Firm's EIN 11-3518842			
	Firm's address 685 THIRD AVENUE NEW YORK, NY 10017		Phone no. 212-503-8800		

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: UNITED WAY OF NEW YORK CITY HELPS TO MOBILIZE OUR COMMUNITIES TO BREAK DOWN BARRIERS AND BUILD OPPORTUNITIES THAT IMPROVE THE LIVES OF LOW-INCOME NEW YORKERS, FOR THE BENEFIT OF ALL. (SEE SCHEDULE O)

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 21,599,998. including grants of \$ 19,409,244.) (Revenue \$)

EDUCATION:

UNITED WAY OF NEW YORK CITY WORKS TO INCREASE THE NUMBER OF CHILDREN AND YOUTH GRADUATING FROM HIGH SCHOOL READY FOR COLLEGE, A CAREER, AND CITIZENSHIP. FOR EXAMPLES OF OUR EDUCATION INITIATIVES SEE SCHEDULE O.

4b (Code:) (Expenses \$ 3,772,313. including grants of \$ 2,704,404.) (Revenue \$)

INCOME:

UNITED WAY OF NEW YORK CITY PARTNERS WITH COMMUNITY BASED ORGANIZATIONS, FINANCIAL INSTITUTIONS, GOVERNMENT AGENCIES, AND OTHER STAKEHOLDERS TO REDUCE THE NUMBER OF FINANCIALLY INSECURE FAMILIES. FOR EXAMPLES OF OUR INCOME STABILITY INITIATIVES SEE SCHEDULE O.

4c (Code:) (Expenses \$ 8,956,767. including grants of \$ 7,145,027.) (Revenue \$)

HEALTHY FOOD ACCESS:

UNITED WAY OF NEW YORK CITY INCREASES ACCESS TO HEALTHY FOODS AND IMPROVES NUTRITION HEALTH LITERACY TO INCREASE THE NUMBER OF LOW-INCOME FAMILIES LEADING HEALTHIER, MORE ACTIVE LIVES. FOR EXAMPLES OF OUR HEALTH AND OTHER INITIATIVES SEE SCHEDULE O.

4d Other program services (Describe in Schedule O.) (Expenses \$ 17,685,123. including grants of \$ 16,971,906.) (Revenue \$ 330,597.)

4e Total program service expenses 52,014,201.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		X
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	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?		
12b	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.		
13a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1a	36		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	36		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NY, NJ, CT, AL, AK, AR, CA, CO, DC, FL, GA, HI**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **GINA GOODENOW, CONTROLLER. - (212) 251-4042**
205 EAST 42ND STREET, NEW YORK, NY 10017

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

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

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ISIDORE MAYROCK DIRECTOR	1.00	X						0.	0.	0.
(19) ANISH MELWANI DIRECTOR	1.00	X						0.	0.	0.
(20) TED MOUDIS DIRECTOR	1.00	X						0.	0.	0.
(21) ROBERT MULLEN DIRECTOR	1.00	X						0.	0.	0.
(22) DAVID OWEN DIRECTOR	1.00	X						0.	0.	0.
(23) JOSHUA B. MASON DIRECTOR	1.00	X						0.	0.	0.
(24) DENISE PICKETT DIRECTOR AND VICE CHAIR	1.00	X		X				0.	0.	0.
(25) JENNIFER RAAB DIRECTOR	1.00	X						0.	0.	0.
(26) BRAD ROTHBAUM DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,799,256.	0.	163,569.
d Total (add lines 1b and 1c)								1,799,256.	0.	163,569.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **18**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SAFIR & ASSOCIATES LLC 1394 BARROWS AVENUE, OAKLAND, CA 94610	CAPACITY BUILDING	261,500.
THE TASC GROUP, LLC, 153 WEST 27TH STREET, STE 405, NEW YORK, NY 10001	MARKETING & COMMUNICATION	170,565.
WENDY FLEISCHER 674 CARROLL STREET #4, BROOKLYN, NY 11215	CHANGE CAPITAL FUND COORDINATOR	160,870.
SUZETTE HUNTE 327 MACDONOUGH ST, BROOKLYN, NY 11223	STRATEGIC LEADERSHIP	156,000.
ATAPE GROUP LLC 555 KAPPOCK ST, BRONX, NY 10463	INSTRUCTIONAL LEADERSHIP	147,500.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **9**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MICHAEL SCHMIDTBERGER DIRECTOR AND CO-CHAIR	1.00	X		X				0.	0.	0.
(28) JEFFREY SHERMAN DIRECTOR	1.00	X						0.	0.	0.
(29) AMANI TOOMER DIRECTOR	1.00	X						0.	0.	0.
(30) DAVID TURNER DIRECTOR	1.00	X						0.	0.	0.
(31) KARYN TWARONITE DIRECTOR	1.00	X						0.	0.	0.
(32) LISA CARNOY DIRECTOR	1.00	X						0.	0.	0.
(33) CHARLES P WANG DIRECTOR	1.00	X						0.	0.	0.
(34) RUDOLPH WYNTER DIRECTOR	1.00	X						0.	0.	0.
(35) KYUNG B. YOON DIRECTOR	1.00	X						0.	0.	0.
(36) NANCY ZIMPHER DIRECTOR	1.00	X						0.	0.	0.
(37) ROSSIE TURMAN III DIRECTOR	1.00	X						0.	0.	0.
(38) DIPTI GULATI DIRECTOR	1.00	X						0.	0.	0.
(39) SHEENA WRIGHT PRESIDENT & CEO	50.00			X				358,334.	0.	24,413.
(40) JOHN A. MCKEGNEY EXEC. VP & CFO (FORMER)	50.00			X				95,792.	0.	726.
(41) SUNITA SUBRAMANIAN GENERAL COUNSEL AND ASST.	45.00			X				196,272.	0.	8,581.
(42) LESLEIGH IRISH-UNDERWOOD SNR VP OF MARKETING & COMM	45.00				X			205,370.	0.	8,948.
(43) NICOLE GALLANT SNR VP OF CI	45.00				X			195,435.	0.	7,724.
(44) ELENA PAK SR VP OF RESOURCE DEV. (FORMER)	45.00					X		145,644.	0.	19,606.
(45) JACQUELINE JENKINS VP OF STRATEGY MANAGEMENT	45.00					X		149,399.	0.	14,696.
(46) MIRIAM BENITEZ VP OF HUMAN CAPITAL	45.00					X		146,407.	0.	12,967.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 27,249,436.					
	b Membership dues	1b					
	c Fundraising events	1c 2,585,205.					
	d Related organizations	1d 7,549.					
	e Government grants (contributions)	1e 26,115,256.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 5,917,993.					
	g Noncash contributions included in lines 1a-1f: \$	204,800.					
	h Total. Add lines 1a-1f	▶ 61,875,439.					
	Program Service Revenue	2 a CAMPAIGN FEES					Business Code 900099
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f		▶ 330,597.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 267,684.				267,684.	
	4 Income from investment of tax-exempt bond proceeds	▶					
	5 Royalties	▶					
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		9,082,611.					
		b Less: cost or other basis and sales expenses	8,916,317.				
		c Gain or (loss)	166,294.				
	d Net gain or (loss)	▶ 166,294.				166,294.	
	8 a Gross income from fundraising events (not including \$ 2,585,205. of contributions reported on line 1c). See Part IV, line 18	a 453,967.					
		b Less: direct expenses	b 453,967.				
		c Net income or (loss) from fundraising events	▶ 0.				
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities	▶					
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory	▶					
Miscellaneous Revenue		Business Code					
11 a OTHER REVENUE	900099	67,649.				67,649.	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d	▶ 67,649.						
12 Total revenue. See instructions.	▶ 62,707,663.	330,597.	0.	501,627.			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	45,965,760.	45,965,760.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	264,821.	264,821.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,277,033.	300,796.	698,216.	278,021.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,298,755.	2,620,298.	3,057,110.	1,621,347.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	153,712.	56,417.	64,191.	33,104.
9 Other employee benefits	1,138,782.	405,870.	497,513.	235,399.
10 Payroll taxes	634,287.	223,887.	278,845.	131,555.
11 Fees for services (non-employees):				
a Management				
b Legal	96,438.		96,438.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	226,750.			226,750.
f Investment management fees	71,899.		71,899.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,676,915.	425,910.	1,093,411.	157,594.
12 Advertising and promotion	74,356.	19,982.	17,354.	37,020.
13 Office expenses	397,141.	98,743.	115,053.	183,345.
14 Information technology				
15 Royalties				
16 Occupancy	1,674,091.	650,214.	633,506.	390,371.
17 Travel	104,316.	52,179.	32,133.	20,004.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	267,018.	71,460.	151,207.	44,351.
20 Interest	633,130.	245,906.	239,588.	147,636.
21 Payments to affiliates	387,306.	122,899.	264,407.	
22 Depreciation, depletion, and amortization	463,814.	174,993.	175,629.	113,192.
23 Insurance	196,590.	76,355.	74,393.	45,842.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CAMPAIGN EVENTS	450,577.	90,319.	108,291.	251,967.
b EQUIP. RENTALS & EXP.	330,405.	106,339.	145,671.	78,395.
c DUES & SUBSCRIPTIONS	87,648.	22,935.	31,775.	32,938.
d TELEPHONE	35,168.	18,118.	10,130.	6,920.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	63,906,712.	52,014,201.	7,856,760.	4,035,751.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	963,602.	1	954,091.
	2 Savings and temporary cash investments	424,722.	2	3,921,884.
	3 Pledges and grants receivable, net	13,491,294.	3	10,321,522.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	939,127.	9	981,900.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,622,587.		
	b Less: accumulated depreciation	10b 1,287,816.		
	11 Investments - publicly traded securities	9,602,303.	10c	9,334,771.
	12 Investments - other securities. See Part IV, line 11	10,291,307.	11	9,458,295.
	13 Investments - program-related. See Part IV, line 11	459,908.	12	1,265,261.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	501,759.	14	455,309.
16 Total assets. Add lines 1 through 15 (must equal line 34)	36,674,022.	15	36,693,033.	
Liabilities	17 Accounts payable and accrued expenses	2,210,185.	16	3,262,529.
	18 Grants payable	5,729,538.	17	7,695,730.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties	10,522,642.	23	10,587,750.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,461,762.	24	6,056,306.
	26 Total liabilities. Add lines 17 through 25	23,924,127.	25	27,602,315.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,545,457.	26	2,080,265.
	28 Temporarily restricted net assets	3,878,434.	27	4,683,510.
	29 Permanently restricted net assets	3,326,004.	28	2,326,943.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/>			
	30 Capital stock or trust principal, or current funds		29	
	31 Paid-in or capital surplus, or land, building, or equipment fund		30	
	32 Retained earnings, endowment, accumulated income, or other funds		31	
33 Total net assets or fund balances	12,749,895.	32	9,090,718.	
34 Total liabilities and net assets/fund balances	36,674,022.	33	36,693,033.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	62,707,663.
2	Total expenses (must equal Part IX, column (A), line 25)	2	63,906,712.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,199,049.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,749,895.
5	Net unrealized gains (losses) on investments	5	-269,688.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,190,440.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,090,718.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	X

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization UNITED WAY OF NEW YORK CITY	Employer identification number 13-2617681
--	---

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	63681587.	67043537.	57980327.	56280856.	61875439.	306861746
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	63681587.	67043537.	57980327.	56280856.	61875439.	306861746
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						306861746

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	63681587.	67043537.	57980327.	56280856.	61875439.	306861746
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	294,236.	185,765.	192,129.	271,074.	267,684.	1210888.
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.)	-54,977.	34,021.	33,548.		67,649.	80,241.
11 Total support. Add lines 7 through 10						308152875
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.58	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.62	%
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2015

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

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

Name of organization UNITED WAY OF NEW YORK CITY	Employer identification number 13-2617681
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW YORK CITY DEPARTMENT OF EDUCATION 52 CHAMBERS STREET NEW YORK, NY 10007	\$ 16,370,683.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NEW YORK STATE DEPARTMENT OF HEALTH HUNGER PREV. & NUTRITION 150 BROADWAY, 6TH FL W ALBANY, NY 12204	\$ 7,848,950.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

UNITED WAY OF NEW YORK CITY

13-2617681

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization UNITED WAY OF NEW YORK CITY	Employer identification number 13-2617681
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **UNITED WAY OF NEW YORK CITY** Employer identification number **13-2617681**

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		88,044.													
c Total lobbying expenditures (add lines 1a and 1b)		88,044.													
d Other exempt purpose expenditures		63,818,668.													
e Total exempt purpose expenditures (add lines 1c and 1d)		63,906,712.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	87,716.	265.	104,077.	88,044.	280,102.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	87,164.		60,468.		147,632.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
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:			
a 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?			
e 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			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number
13-2617681

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	5	2
2 Aggregate value of contributions to (during year)	0.	1,280,000.
3 Aggregate value of grants from (during year)	79,089.	0.
4 Aggregate value at end of year	144,293.	1,710,010.

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

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

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply):
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,326,004.	3,256,414.	3,222,866.	3,616,285.	2,793,822.
b Contributions	0.	94,590.		450,000.	877,440.
c Net investment earnings, gains, and losses	-999,061.	-25,000.	33,548.	34,021.	-54,977.
d Grants or scholarships					
e Other expenditures for facilities and programs				877,440.	
f Administrative expenses					
g End of year balance	2,326,943.	3,326,004.	3,256,414.	3,222,866.	3,616,285.

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

- a Board designated or quasi-endowment %
 - b Permanent endowment 100.00 %
 - c Temporarily restricted endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
3a(i) unrelated organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		9,285,531.	1,049,548.	8,235,983.
d Equipment		1,337,056.	238,268.	1,098,788.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,334,771.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	45,463,223.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-269,688.
b	Donated services and use of facilities	2b	78,332.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-191,356.
3	Subtract line 2e from line 1	3	45,654,579.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	17,053,084.
c	Add lines 4a and 4b	4c	17,053,084.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	62,707,663.

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

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

1	Total expenses and losses per audited financial statements	1	49,122,400.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	78,332.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,545,528.
e	Add lines 2a through 2d	2e	1,623,860.
3	Subtract line 2e from line 1	3	47,498,540.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	16,408,172.
c	Add lines 4a and 4b	4c	16,408,172.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	63,906,712.

Part XIII Supplemental Information.

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

PART V, LINE 4:

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

PART X, LINE 2:

UWNYC BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2016 AND 2015 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RESERVE FOR UNCOLLECTABLE RECEIVABLES FOR CAMPAIGN 644,912.

Part XIII Supplemental Information (continued)

DONOR DESIGNATIONS 16,408,172.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 17,053,084.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PENSION RELATED CHANGES 1,499,078.

PROVISION FOR UNCOLLECTIBLE RECEIVABLES FOR CAMPAIGN

CHANGE IN PERPETUAL TRUST 46,450.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 1,545,528.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATIONS 16,408,172.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GRIDIRON GALA (event type)	WLC LUNCHEON (event type)	1 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	1,800,752.	974,642.	263,778.	3,039,172.
	2 Less: Contributions	1,664,962.	874,715.	45,528.	2,585,205.
	3 Gross income (line 1 minus line 2)	135,790.	99,927.	218,250.	453,967.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	340,588.	99,927.	13,452.	453,967.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				453,967.
	11 Net income summary. Subtract line 10 from line 3, column (d)				0.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: PREMIERE EVENTS PLUS, INC

(I) ADDRESS OF FUNDRAISER: 1441 BROADWAY SUITE 5001, NEW YORK, NY 10018

(I) NAME OF FUNDRAISER: JFM GROUP

(I) ADDRESS OF FUNDRAISER: 629 FIFTH AVE, STE 106, PELHAM, NY 10803

(I) NAME OF FUNDRAISER: MAX MARA

Part IV Supplemental Information *(continued)*

(I) ADDRESS OF FUNDRAISER: 813 MADISON AVENUE, NEW YORK, NY 10065

(I) NAME OF FUNDRAISER: THE PROMETHEUS EXCHANGE LLC

(I) ADDRESS OF FUNDRAISER:

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2015

Open to Public
Inspection

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

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number
13-2617681

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFTER SCHOOL ALL STARS OF NYC 8000 UTOPIA PKWY JAMAICA, NY 11439	11-3306766	501(C)(3)	346,999.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY
BRONKWORKS 60 EAST TREMONT AVE. BRONX, NY 10453	13-3254484	501(C)(3)	521,709.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY
CAMEA 1720 CHURCH AVENUE, 2ND FL BROOKLYN, NY 11226	11-2480339	501(C)(3)	275,560.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY
CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NY - 1011 FIRST AVENUE - NEW YORK, NY 10022	13-5562184	501(C)(3)	403,611.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY
CENTER FOR SUPPORTIVE SCHOOLS 461 GRAND STREET BROOKLYN, NY 11211	22-2962532	501(C)(3)	439,478.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY
EAST SIDE HOUSE INC. 337 ALEXANDER AVE. BRONX, NY 10454	13-1623989	501(C)(3)	1,339,866.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP) - UWNVC AND THE NEW YORK CITY

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

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2015)

UNITED WAY OF NEW YORK CITY
 Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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)	362,607.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
FAMILY HEALTH INTERNATIONAL 71 5TH AVENUE NEW YORK, NY 10003	23-7413005	501(C)(3)	503,424.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
GLOBAL KIDS, INC. 137 EAST 25TH STREET, 2ND FLOOR NEW YORK, NY 10010	13-3629485	501(C)(3)	692,666.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE, 9TH FL NEW YORK, NY 10001	13-5598710	501(C)(3)	949,377.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
GRAND STREET SETTLEMENT 80 FITT STREET NEW YORK, NY 10002	13-5562230	501(C)(3)	364,126.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
HENRY STREET SETTLEMENT 265 HENRY STREET NEW YORK, NY 10002	13-1562242	501(C)(3)	287,279.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
MAKE THE ROAD NY 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)(3)	807,630.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT - 130 STUYVESANT PLACE - STATEN ISLAND, NY 10301	23-7085239	501(C)(3)	638,483.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVE/UFT - 52 BROADWAY - NEW YORK, NY 10004	46-1227433	501(C)(3)	1,330,435.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERSHIP WITH CHILDREN, INC. 299 BROADWAY, SUITE NEW YORK, NY 10007	13-5596751	501(C)(3)	1,006,674.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
PATHWAYS TO LEADERSHIP 598 BROADWAY NEW YORK, NY 10012-3352	38-3886413	501(C)(3)	725,345.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
PHIPPS COMMUNITY DEVELOPMENT CORPORATION - 902 BROADWAY, 13TH FLOOR - NEW YORK, NY 10010	13-2707665	501(C)(3)	363,812.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
SCAN-NEW YORK 245 E 87TH ST STE 11E NEW YORK, NY 10128	13-2912963	501(C)(3)	312,966.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
SCO FAMILY OF SERVICES 1 ALEXANDER PLACE GLEN COVE, NY 11542	11-2777066	501(C)(3)	283,563.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
SPORTS & ARTS IN SCHOOLS FOUNDATION - 58-12 QUEENS BLVD - WOODSIDE, NY 11377	11-3112635	501(C)(3)	1,003,204.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
ST. NICKS ALLIANCE 2 KINGSLAND AVENUE, 2ND FLOOR BROOKLYN, NY 11211	51-0192170	501(C)(3)	354,145.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
TEACHER COLLEGE, COLUMBIA UNIVERSITY - 525 W 120TH ST - NEW YORK, NY 10027	13-1624202	501(C)(3)	297,774.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
THE DOOR - A CENTER OF ALTERNATIVES - 121 AVENUE OF THE AMERICAS - NEW YORK, NY 10013	13-6127348	501(C)(3)	368,428.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY

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

(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)	1,409,771.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
URBAN ARTS PARTNERSHIP 414 BROADWAY FL NEW YORK, NY 10013	13-3554734	501(C)(3)	495,125.	0.			ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY
ATAPE GROUP, LLC 555 KAPPOCK STREET BRONX, NY 10463	46-1739670		356,846.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
THE NEW SCHOOL CENTER FOR NYC AFFAIRS - 66 WEST 12TH STREET - NEW YORK, NY 10111	13-3297197	501(C)(3)	50,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
CHILD & FAMILY POLICY CENTER 505 5TH AVENUE DES MOINES, IA 50309	42-1378567	501(C)(3)	49,971.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
CHILDREN'S DEFENSE FUND 25 E STREET NORTHWEST WASHINGTON, NY 20001	52-0895622	501(C)(3)	26,400.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
CITY YEAR, INC. 287 COLUMBUS BOSTON, NY 02116	22-2882549	501(C)(3)	180,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
COMMUNITY SERVICE SOCIETY OF NEW YORK - 105 EAST 22ND STREET, 2ND FL - NEW YORK, NY 10010	13-5562202	501(C)(3)	264,618.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION - 625 JAMAICA AVENUE - BROOKLYN, NY 11208	11-2683663	501(C)(3)	12,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN.

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

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EAST SIDE HOUSE INC. 337 ALEXANDER AVE. BRONX, NY 10454	13-1623989	501(C)(3)	865,510.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
EXPANDED SCHOOLS 1440 BROADWAY, 16TH FLR NEW YORK, NY 10018	13-4004500	501(C)(3)	166,950.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
GENERATION READY 352 SEVENTH AVE NEW YORK, NY 10001	13-3762096	501(C)(3)	310,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
HOUGHTON MIFFLIN HARCOURT 222 BERKELEY STREET BOSTON, MA 02116-3764	80-0277046		73,703.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
INWOOD HOUSE 320 EAST 82ND STREET NEW YORK, NY 10028	13-5562254	501(C)(3)	180,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
KINETIC LEARNING ENTERPRISES 205 ROCKINGHAM ROW PRINCETON, NY 08540	27-0274973		23,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
PLANET YOUNG 125-28 QUEENS BLVD KEW GARDENS, NY 11415	45-5296107		9,437.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
REACH OUT AND READ OF GREATER NEW YORK - 30 EAST 33RD SUREET - NEW YORK, NY 10016	13-4080045	501(C)(3)	15,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
READ ALLIANCE 80 MAIDEN LANE, 11TH FLOOR NEW YORK, NY 10038	13-4091062	501(C)(3)	216,265.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,

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ROAD TO SUCCESS 307 W 38TH ST STE1101 NEW YORK, NY 10018	41-2166096	501(C)(3)	180,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
SAFIR & ASSOCIATES LLC 1394 BARROW'S RD OAKLAND, CA 94610	81-1068039		207,000.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
TARRYTOWN HOUSE ESTATE & CONFERENCE CENTER - 49 EAST SUNNYSIDE LANE - TARRYTOWN, NJ 10591	20-2373966		21,410.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP - 50 EAST 168TH STREET - BRONX, NY 10452	11-3099604	501(C)(3)	168,395.	0.			READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN,
MCGILADREY LLP 331 WEST 3RD STREET DAVENPORT, IA 06902	42-0714325		50,000.	0.			FOOD ASSISTANCE COLLABORATIVE- THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND
AGRI PROCESSORS INCORPORATED 5600 1ST AVENUE BROOKLYN, NY 11220	22-2885839		25,612.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
AGUDATH ISRAEL OF AMERICA 42 BROADWAY NEW YORK, NY 10004	13-3918814	501(C)(3)	5,125.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
BALTER SALES COMPANY, INC. 209 BOWERY NEW YORK, NY 10002	13-1911598		130,652.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
BENZ'S FOOD PRODUCTS, INCORPORATED 332 ALBANY AVENUE BROOKLYN, NY 11213	11-2841450		54,325.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S

UNITED WAY OF NEW YORK CITY

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

(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
CRANBERRY HALL FARM P.O BOX 227 COOKSTOWN, NJ 08551	22-2897065		76,128.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
CURTIS WARD REFRIGERATION 217-44A 98TH AVENUE QUEENS VILLAGE, NY 11429	11-1748460		35,381.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
DAVID ELLIOT POULTRY FARM 300 BRECK STREET SCRANTON, PA 18505	24-0835679		33,127.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
DRISCOLL FOODS 174 DELAWANNA CLIFTON, NJ 07014	22-3482240		4,114,255.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
FRATERNITE NOTRE DAME, INC 502 N CENTRAL AVENUE CHICAGO, IL 60644	13-3600714	501(C)(3)	5,125.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
GOLDEN EARTHWORM ORGANIC FARM, LLC 652 PECONIC BAY BLVD., P.O BOX 871 JAMESPORT, NY 11947	41-2170690		39,600.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE, 9TH FL NEW YORK, NY 10001	13-5598710	501(C)(3)	29,999.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
GRAND CENTRAL NEIGHBORHOOD 120 EAST 32ND STREET NEW YORK, NY 10016-8648	13-3534255	501(C)(3)	5,000.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
GROWN NYC 51 CHAMBERS STREET, RM NEW YORK, NY 10007	13-2765465	501(C)(3)	30,000.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARTY ROOTS FARM P.O BOX 277 TIVOLI, NY 12583	20-2925491		51,840.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
JAN HUS PRESBYTERIAN CHURCH 351 E. 74TH STREET NEW YORK, NY 10021	13-1635255	501(C)(3)	29,998.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
KENOVER MARKETING CORPORATION 9 - 29TH STREET BROOKLYN, NY 11232	11-3328605		6,494.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
NEIGHBORS TOGETHER 2094 FULTON STREET BROOKLYN, NY 11233-6009	11-2632109	501(C)(3)	5,125.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
OVERCOMING LOVE MINISTRIES 7814 ROCKAWAY BLVD WOODHAVEN, NY 11421-2926	11-2774575		5,125.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
RED APPLE FRUIT AND VEGETABLE 455 ALBANY AVENUE BROOKLYN, NY 11213	06-2607071		27,637.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
RUSSO'S ROOTS LLC 277 N. SOCIETY RD CANTEBURY, CT 06331	47-2906381		23,760.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
SALEM COMMUNITY SERVICE COUNCIL 211 WEST 129TH STREET NEW YORK, NY 10027	13-2665561	501(C)(3)	29,993.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
SALEM UNITED METHODIST CHURCH 2190 ADAM CLAYTON POWELL JR. BVLD NEW YORK, NY 10027	56-1368982	501(C)(3)	5,000.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S

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(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
SHABOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN, NY 11225	11-3180901		25,617.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
STONELEDGE FARM LLC 359 ROSS RULAND RD SOUTH CAIRO, NY 12482	20-4541185		35,640.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
THE FARM AT MILLER'S CROSSING 81 ROXBURY ROAD HUDSON, NY 12534	14-1811452		52,272.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
THE RIVER FUND NEW YORK, INC. 89-11 LEFFERTS BLVD RICHMOND HILL, NY 11418	11-3450363	501(C)(3)	5,000.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
UNITED COACH LINE INC. 3120 ARTHUR KILL ROAD STATEN ISLAND, NY 10309	27-1227571		7,480.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
WAY OUT CHURCH MINISTRIES 520 E. 148TH STREET BRONX, NY 10455-2844	13-2953909		5,125.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
WHISTLE DOWN FARM 20 SCHOOL TEACHER ROAD HUDSON, NY 12534	46-2876339		53,280.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
WINDFLOWER FARM 585 MEETING HOUSE ROAD VALLEY FALLS, NY 12185	52-2336178		74,448.	0.			HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
AGRI PROCESSORS INCORPORATED 5600 1ST AVENUE BROOKLYN, NY 11220	22-2885839		8,843.	0.			SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BENZ'S FOOD PRODUCTS, INCORPORATED 332 ALBANY AVENUE BROOKLYN, NY 11213	11-2841450		23,555.	0.			SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION
DAVID ELLIOT POULTRY FARM 300 BRECK STREET SCRANTON, PA 18505	24-0835679		7,385.	0.			SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION
DRISCOLL FOODS 174 DELAWANNA AVENUE CLIFTON, NJ 07014	22-3482240		1,018,747.	0.			SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION
SHABOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN, NY 11225	11-3180901		6,654.	0.			SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION
COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC - 56 BAY STREET - STATEN ISLAND, NY 10301	13-3556132	501(C)(3)	25,000.	0.			HURRICANE SANDY RECOVERY FUND (HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF. HSRF HAS PROVIDED
ROCKAWAY YOUTH TASK FORCE, INC. 19-20 MOFF AVENUE FAR ROCKAWAY, NY 11691	45-4926515	501(C)(3)	25,000.	0.			HURRICANE SANDY RECOVERY FUND (HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF. HSRF HAS PROVIDED
BRONXWORKS 60 EAST TREMONT AVENUE BRONX, NY 10453	13-3254484	501(C)(3)	197,327.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITIES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
CHINESE-AMERICAN PLANNING COUNCIL, INC. - 150 ELIZABETH ST - NEW YORK, NY 10012	13-6202692	501(C)(3)	136,063.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITIES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC - 56 BAY STREET - STATEN ISLAND, NY 10301	13-3556132	501(C)(3)	79,972.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITIES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD BANK FOR NEW YORK/ FOOD CHANGE - 39 BROADWAY, 10TH FLOOR - NEW YORK, NY 10006	13-3036532	501(C)(3)	294,266.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
NEW YORK CITY COALITION AGAINST HUNGER - 16 BEAVER STREET, 3RD FLOOR - NEW YORK, NY 10004	13-3471350	501(C)(3)	192,792.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC. - 217 WYCKOFF AVENUE - BROOKLYN, NY 11237	11-2453853	501(C)(3)	162,176.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
URBAN UPBOUND 38-81 13TH ST ISLAND CITY, NY 11101	86-1096987	501(C)(3)	75,685.	0.			FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP
HOUSING COURTS ANSWERS 125 MAIDEN LANE, RM 318 NEW YORK, NY 10013	13-3317188	501(C)(3)	30,000.	0.			HOUSING COURT ANSWERS CRISIS SUPPORTS - THIS SERVICE IS A RENTAL ARREARS, UTILITY AND
CAUSE EFFECTIVE 505 EIGHTH AVENUE, SUITE 1212 NEW YORK, NY 10018	13-3083978	501(C)(3)	60,000.	0.			BOARDSERVENYC-BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC
STATEN ISLAND NFP ASSOCIATION, INC. - 5 TELFORT DRIVE SUITE - STATEN ISLAND, NY 10311	20-3560375	501(C)(3)	5,000.	0.			BOARDSERVENYC-BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC
ANAT GERSTEIN, INC.. 108-18 QUEENS BLVD FOREST HILLS, NY 11375	80-0609476		41,000.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
COMMUNITY SOLUTIONS 125 MAIDEN LANE NEW YORK, NY 10038	27-3523909	501(C)(3)	225,000.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15

UNITED WAY OF NEW YORK CITY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION - 625 JAMAICA AVENUE - BROOKLYN, NY 11208	11-2683663	501(C)(3)	171,200.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
FIFTH AVENUE COMMITTEE 294 SMITH STREET BROOKLYN, NY 11231	11-2475743	501(C)(3)	179,400.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
MDRC 16 E. 34TH STREET NEW YORK, NY 10016	23-7379473	501(C)(3)	110,000.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
NEW SETTLEMENT APARTMENTS 1512 TOWNSEND AVENUE BRONX, NY 10452	14-1719016	501(C)(3)	164,375.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
NONPROFIT FINANCE FUND 70 WEST 36TH STREET 11TH FLOOR NEW YORK, NY 10018	13-3238657	501(C)(3)	70,000.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
PUBLIC WORKS PARTNERS LCC 220 FIFTH AVE, 2ND FL NEW YORK, NY 10001	27-3647604		33,900.	0.			CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15
ST. NICKS ALLIANCE 2 KINGSLAND AVENUE, 2ND BROOKLYN, NY 11211	51-0192170	501(C)(3)	172,495.	0.			CHANGE CAPITAL FUND - EXPANDING NYC SERVICE -
MAYORS FUND 253 BROADWAY, 6TH FL NEW YORK, NY 10007	13-3783906	501(C)(3)	225,000.	0.			EXPANDING NYC SERVICE - YEARS PROJECT IS TO IMPLEMENT A MULTI-YEAR HPNAP--HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S
CODERO HOSTING 8735 ROSEHILL ROAD LENEXA, KS 66215	27-0214713		13,138.	0.			

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
READNYC	2	22,249.	0.		
FOOD ASSISTANCE COLLABORATIVE	1	25,239.	0.		
HPNAP	2	41,880.	0.		
BOARDSERVE NYC	2	19,900.	0.		
CHANGE CAPITAL FUND	2	155,553.	0.		

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

PART I, LINE 2:
 AS PART OF THE PROCESS OF MONITORING THE COMMUNITY BASED ORGANIZATIONS THAT UWNYC FUNDS, UWNYC REQUIRES A DETAILED BUDGET TO IDENTIFY HOW THE AGENCY INTENDS TO SPEND THE CONTRACT AWARD AND AN EXPENDITURE REPORT TO SUBSTANTIATE THE AMOUNT REQUESTED FOR PAYMENT. UWNYC ALSO REQUIRES AND REVIEW AGENCIES' PROGRAMMATIC DATA AND ACCOMPLISHMENTS. FINALLY, UWNYC CONDUCTS PROGRAMMATIC REVIEWS AT THE PROGRAM SITES AND PROVIDE FEEDBACK.

PART II, LINE 1, COLUMN (H):

Part IV Supplemental Information

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

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS
ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL
THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND
ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: BRONXWORKS

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS
ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL
THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND
ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: CAMBA

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS
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THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

Part IV Supplemental Information

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NY

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF

EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT

AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST

PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS

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THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR SUPPORTIVE SCHOOLS

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF

EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT

AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST

PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS

ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL

THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: EAST SIDE HOUSE INC.

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF

EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT

AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST

Part IV Supplemental Information

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

NAME OF ORGANIZATION OR GOVERNMENT: EL-PUENTE

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: FAMILY HEALTH INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: GLOBAL KIDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF

Part IV Supplemental Information

EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: GRAND STREET SETTLEMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: HENRY STREET SETTLEMENT

Part IV Supplemental information

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: MAKE THE ROAD NY

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

Part IV Supplemental InformationATTENDANCE IMPROVEMENT SERVICES.NAME OF ORGANIZATION OR GOVERNMENT:NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVE/UFT(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
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ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: PARTNERSHIP WITH CHILDREN, INC.(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
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ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: PATHWAYS TO LEADERSHIP(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST

Part IV Supplemental Information

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

NAME OF ORGANIZATION OR GOVERNMENT:

PHIPPS COMMUNITY DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: SCAN-NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: SCO FAMILY OF SERVICES

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

Part IV Supplemental Information

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

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

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: ST. NICKS ALLIANCE

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: TEACHER COLLEGE, COLUMBIA UNIVERSITY

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
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ATTENDANCE IMPROVEMENT SERVICES.

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

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
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ATTENDANCE IMPROVEMENT SERVICES.

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

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

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
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ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL
THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND

Part IV Supplemental InformationATTENDANCE IMPROVEMENT SERVICES.NAME OF ORGANIZATION OR GOVERNMENT: URBAN ARTS PARTNERSHIP(H) PURPOSE OF GRANT OR ASSISTANCE: ATTENDANCE IMPROVEMENT DROPOUT

PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF
EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT
AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST
PERFORMING PUBLIC SCHOOLS. GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS
ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL
THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND
ATTENDANCE IMPROVEMENT SERVICES.

NAME OF ORGANIZATION OR GOVERNMENT: ATAPE GROUP, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE,
ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND
COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND
ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE
THREE.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE,
ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND
COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND
ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE
THREE.

NAME OF ORGANIZATION OR GOVERNMENT: CHILD & FAMILY POLICY CENTER(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE,

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

NAME OF ORGANIZATION OR GOVERNMENT: CHILDREN'S DEFENSE FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: CITY YEAR, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT:

CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION

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(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: EAST SIDE HOUSE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: EXPANDED SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: GENERATION READY

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: HOUGHTON MIFFLIN HARCOURT

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(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: INWOOD HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: KINETIC LEARNING ENTERPRISES

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: PLANET YOUNG

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT:

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REACH OUT AND READ OF GREATER NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: READ ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: ROAD TO SUCCESS

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: SAFIR & ASSOCIATES LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

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NAME OF ORGANIZATION OR GOVERNMENT:

TARRYTOWN HOUSE ESTATE & CONFERENCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT:

WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE.

NAME OF ORGANIZATION OR GOVERNMENT: MCGLADREY LLP

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD ASSISTANCE COLLABORATIVE- THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY. THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON-PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES.

NAME OF ORGANIZATION OR GOVERNMENT: AGRI PROCESSORS INCORPORATED

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

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EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES. RE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: AGUDATH ISRAEL OF AMERICA

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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

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

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

NAME OF ORGANIZATION OR GOVERNMENT: CRANBERRY HALL FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: CURTIS WARD REFRIGERATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: DAVID ELLIOT POULTRY FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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NAME OF ORGANIZATION OR GOVERNMENT: DRISCOLL FOODS

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: FRATERNITE NOTRE DAME, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD SERVICES

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

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

NAME OF ORGANIZATION OR GOVERNMENT: GRAND CENTRAL NEIGHBORHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: GROWN NYC

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTY ROOTS FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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NAME OF ORGANIZATION OR GOVERNMENT: JAN HUS PRESBYTERIAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: KENOVER MARKETING CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: NEIGHBORS TOGETHER

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: OVERCOMING LOVE MINISTRIES

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

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

NAME OF ORGANIZATION OR GOVERNMENT: RED APPLE FRUIT AND VEGETABLE

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: RUSSO'S ROOTS LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: SALEM COMMUNITY SERVICE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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NAME OF ORGANIZATION OR GOVERNMENT: SALEM UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: SHABBOS FISH MARKET

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: STONELEDGE FARM LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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

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

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

NAME OF ORGANIZATION OR GOVERNMENT: THE RIVER FUND NEW YORK, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED COACH LINE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: WAY OUT CHURCH MINISITRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

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NAME OF ORGANIZATION OR GOVERNMENT: WHISTLE DOWN FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: WINDFLOWER FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: AGRI PROCESSORS INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS; (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS; AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE-KINDERGARTEN.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: SOCIAL SERVICE BLOCK GRANT (SSBG) -

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THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS; (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS; AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE-KINDERGARTEN.

NAME OF ORGANIZATION OR GOVERNMENT: DAVID ELLIOT POULTRY FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS; (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS; AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE-KINDERGARTEN.

NAME OF ORGANIZATION OR GOVERNMENT: DRISCOLL FOODS

(H) PURPOSE OF GRANT OR ASSISTANCE: SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS; (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS; AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE-KINDERGARTEN.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SHABBOS FISH MARKET

(H) PURPOSE OF GRANT OR ASSISTANCE: SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS; (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS; AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE-KINDERGARTEN.

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC

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

(HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF. HSRF HAS PROVIDED BOTH NEAR AND LONGER TERM ASSISTANCE TO INDIVIDUALS, FAMILIES AND ORGANIZATIONS IMPACTED BY THE HURRICANE.

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

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

(HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF. HSRF HAS PROVIDED BOTH NEAR AND LONGER TERM ASSISTANCE TO INDIVIDUALS, FAMILIES AND ORGANIZATIONS IMPACTED BY THE HURRICANE.

NAME OF ORGANIZATION OR GOVERNMENT: BRONXWORKS

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH

Part IV Supplemental Information

INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT:

CHINESE-AMERICAN PLANNING COUNCIL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY HEALTH ACTION OF STATEN ISLAND, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW YORK CITY COALITION AGAINST HUNGER

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

Part IV Supplemental Information

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT: URBAN UPBOUND

(H) PURPOSE OF GRANT OR ASSISTANCE: FOOD SUPPORT CONNECT (FSC) FSC

FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY
CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED
BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH
INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY.

NAME OF ORGANIZATION OR GOVERNMENT: HOUSING COURTS ANSWERS

(H) PURPOSE OF GRANT OR ASSISTANCE: HOUSING COURT ANSWERS CRISIS

SUPPORTS - THIS SERVICE IS A RENTAL ARREARS, UTILITY AND MORTGAGE ARREARS
HOTLINE THAT PROVIDES CRISIS SUPPORT TO RESIDENTS FROM ALL FIVE BOROUGHS
FACING EVICTION DUE TO NONPAYMENT OF RENT, WHO ARE SEEKING RENTAL
ASSISTANCE OR WHO HAVE QUESTIONS REGARDING HOUSING COURT.

NAME OF ORGANIZATION OR GOVERNMENT: CAUSE EFFECTIVE

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: BOARDSERVENYC-BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS.

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

(H) PURPOSE OF GRANT OR ASSISTANCE: BOARDSERVENYC-BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS.

NAME OF ORGANIZATION OR GOVERNMENT: ANAT GERSTEIN, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY SOLUTIONS

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

Part IV Supplemental Information

COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY
REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT
ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL
ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR
MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND
DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT:

CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL
FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC
FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN
COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING
COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY
REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT
ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL
ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR
MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND
DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: FIFTH AVENUE COMMITTEE

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL
FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC
FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN
COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING
COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY
REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT
ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL

Part IV Supplemental Information

ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR
MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND
DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: MDRC

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL
FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC
FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN
COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING
COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY
REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT
ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL
ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR
MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND
DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: NEW SETTLEMENT APARTMENTS

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL
FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC
FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN
COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING
COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY
REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT
ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL
ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR
MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND
DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: NONPROFIT FINANCE FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC WORKS PARTNERS LCC

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: ST. NICKS ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN

Part IV Supplemental Information

COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

NAME OF ORGANIZATION OR GOVERNMENT: MAYORS FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: EXPANDING NYC SERVICE - EXPANDING NYC SERVICE YEARS PROJECT IS TO IMPLEMENT A MULTI-YEAR PLAN TO DOUBLE CURRENT NUMBERS OF INDIVIDUALS FULFILLING A "SERVICE YEAR" (THE "SERVICE YEAR") IN NEW YORK CITY , WITH CROSS SECTOR COLLABORATION AND INNOVATIVE NEW SERVICE YEAR MODELS TO SUPPORT THIS GROWTH, AS WELL AS CONTINUED ADVOCACY FOR FEDERALLY FUNDED AMERICORPS POSITIONS AND AWARENESS OF SERVICE YEAR IMPACTS IN NYC.

NAME OF ORGANIZATION OR GOVERNMENT: CODERO HOSTING

(H) PURPOSE OF GRANT OR ASSISTANCE: HPNAP--HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES; SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS; MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY; AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2015

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X								
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a	X								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.										
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	X								
b Any related organization?	5b	X								
If "Yes" to line 5a or 5b, describe in Part III.										
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	X								
b Any related organization?	6b	X								
If "Yes" on line 6a or 6b, describe in Part III.										
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X								
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X								
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **UNITED WAY OF NEW YORK CITY** Employer identification number **13-2617681**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>SPECIAL EVENT</u>)	X	6	204,800.FMV	
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number
13-2617681

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

COMMUNITY-BASED NON-PROFITS TO TACKLE THE ROOT CAUSES OF POVERTY. WE
DESIGN AND INVEST IN EVIDENCE-BASED INITIATIVES THAT ENSURE LOW-INCOME
NEW YORKERS ARE ABLE TO MEET BASIC NEEDS AND BUILD A BETTER FUTURE. WE
RIGOROUSLY EVALUATE OUR WORK AND USE LESSONS LEARNED TO LEVERAGE A
WORLDWIDE NETWORK OF UNITED WAYS TO INFORM AND ADVANCE PUBLIC POLICIES
THAT PREVENT AND ALLEVIATE POVERTY CITYWIDE. UNITED WAY OF NEW YORK
CITY FOSTERS A MORE ROBUST AND EFFECTIVE NON-PROFIT SECTOR BY WORKING
COLLECTIVELY WITH A CONSORTIUM OF NON-PROFITS WITH SHARED GOALS AND
MEASUREMENT TO BRING SERVICES TO THE PUBLIC IN THE AREAS OF EDUCATION,
INCOME AND HEALTH.

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

WE ENVISION CARING COMMUNITIES WHERE ALL INDIVIDUALS AND FAMILIES HAVE
ACCESS TO QUALITY EDUCATION AND THE OPPORTUNITY TO LEAD HEALTHY AND
FINANCIALLY SECURE LIVES.

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

ORGANIZATIONAL CAPACITY BUILDING:

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

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

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681

DEVELOPMENT; GRANT MAKING; BOTH SYSTEMIC AND DIRECT APPROACHES TO EXPANDED ACCESS TO RESOURCES; LEARNING OPPORTUNITIES TO BUILD ORGANIZATIONAL CAPACITY; AND ADVOCACY FOR THE CONTRIBUTIONS OF THE SECTOR TO THE ECONOMY AND WELL-BEING OF NEW YORKERS. FOR EXAMPLES OF OUR SNYCN INITIATIVES SEE SCHEDULE O.

EXPENSES \$ 1,355,283. INCLUDING GRANTS OF \$ 563,734. REVENUE \$ 0.

EDUCATION 2015/2016

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

CAMPAIGN FOR GRADE LEVEL READING (CGLR)

CGLR 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.

READNYC

READNYC IS UNITED WAY OF NEW YORK CITY'S CAMPAIGN FOR GRADE-LEVEL READING. THROUGH A COLLECTIVE IMPACT APPROACH, THIS INITIATIVE SUPPORTS ATTAINMENT OF GRADE LEVEL READING BY 3RD GRADE AND FOCUSES ON THE

Name of the organization

UNITED WAY OF NEW YORK CITY

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13-2617681

POOREST COMMUNITIES IN NEW YORK CITY. WE BRING TOGETHER COMMUNITY BASED ORGANIZATIONS, FUNDERS, GOVERNMENT OFFICIALS, SCHOOLS, PARENTS, FAMILIES AND MORE, IN ORDER TO WORK TOGETHER TO IMPROVE LITERACY OUTCOMES FOR NYC'S CHILDREN.

INCOME 2015/2016

CHANGE CAPITAL FUND

THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY. CCF BEGAN FUNDING FIVE COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY. EACH NONPROFIT ORGANIZATION WILL BE FUNDED AT \$250,000 PER YEAR FOR FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS.

EMERGENCY FOOD & SHELTER PROGRAM (EFSP)

EFSP HELPS TO PREVENT HUNGER AND PRESERVE SHELTER FOR NEW YORKERS FACING ECONOMIC EMERGENCIES. OVER 400 SOUP KITCHENS, FOOD PANTRIES, AND NONPROFITS ARE AWARDED FUNDING FOR FOOD AND EMERGENCY SHELTER. IN ADDITION, NONPROFITS RECEIVE RESOURCES TO PROVIDE CLIENTS WITH FINANCIAL SUPPORT TO ADDRESS THEIR RENT AND UTILITIES ARREARS. UWNYC PROVIDES FUNDED AGENCIES WITH TECHNICAL ASSISTANCE TO HELP ENSURE THEY ARE PROVIDING THE HIGHEST QUALITY SERVICES AND ARE MEETING CONTRACTUAL OBLIGATIONS.

Name of the organization

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FAMILY FINANCIAL EMPOWERMENT

THE CLOSING THE SKILLS GAP PROGRAM SEEKS TO INCREASE LOW TO MODERATE INCOME WORKING NEW YORKERS' ACCESS TO FINANCIAL CAPABILITY RESOURCES AND SERVICES, HELPING RESIDENTS DEVELOP GREATER ECONOMIC STABILITY AND STRENGTH.

HOUSING COURT ANSWERS CRISIS SUPPORTS

THIS SERVICE IS A RENTAL ARREARS, UTILITY AND MORTGAGE ARREARS HOTLINE THAT PROVIDES CRISIS SUPPORT TO RESIDENTS FROM ALL FIVE BOROUGHES FACING EVICTION DUE TO NONPAYMENT OF RENT, WHO ARE SEEKING RENTAL ASSISTANCE OR WHO HAVE QUESTIONS REGARDING HOUSING COURT.

FOOD SUPPORT CONNECTIONS (FSC)

FSC IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS. NONPROFIT PARTNERS CONDUCT GRASSROOTS OUTREACH AND FACILITATE BENEFITS ACCESS. NONPROFIT STAFF WORK WITH INDIVIDUALS TO DETERMINE BENEFIT ELIGIBILITY, ASSIST WITH THE APPLICATION AND DOCUMENTATION PROCESS, SCHEDULE APPOINTMENTS WITH NEW YORK CITY HUMAN RESOURCE ADMINISTRATION (HRA), AND ADVOCATE IF BARRIERS ARE ENCOUNTERED. UWNYP PARTNERS WITH FOOD BANK, NEW YORK CITY COALITION AGAINST HUNGER, BRONXWORKS, CHINESE-AMERICAN PLANNING COUNCIL, COMMUNITY HEALTH ACTION OF STATEN ISLAND AND RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL TO DELIVER SERVICES THROUGHOUT THE CITY.

HEALTHY FOOD ACCESS 2015/16**HUNGER PREVENTION AND NUTRITION ASSISTANCE PROGRAM (HPNAP)**

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681

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

ORGANIZATIONAL CAPACITY BUILDING 2015/16

BOARDSERVENYC

OUR BOARDSERVENYC INITIATIVE BUILDS THE CAPACITY OF NONPROFITS IN NEW
YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS.
THE BOARD CANDIDATES REPRESENT A CROSS-SECTION OF NEW YORKERS OF VARIED
SKILLS AND BACKGROUNDS, ALL OF WHOM ARE INTERESTED IN VOLUNTEERING
THEIR TIME AS BOARD MEMBERS. BOARDSERVENYC PARTICIPATION INCLUDES
TRAINING FOR BOARD MEMBER CANDIDATES IN NONPROFIT GOVERNANCE, TRAINING
FOR NONPROFITS TO RECRUIT, ENGAGE, AND UTILIZE NEW BOARD MEMBERS, AND
COACHING AND PEER LEARNING GROUPS FOR NEWLY PLACED BOARD MEMBERS OVER
THEIR FIRST YEAR OF BOARD SERVICE.

SELF-SUFFICIENCY STANDARD REPORT

THE SELF-SUFFICIENCY STANDARD REPORT FOR NEW YORK CITY MEASURES HOW
MUCH INCOME A FAMILY OF A CERTAIN COMPOSITION IN A GIVEN PLACE MUST
EARN TO MEET THEIR BASIC NEEDS WITHOUT ANY ASSISTANCE, PUBLIC OR
PRIVATE. IT INCLUDES DETAILS ABOUT THE NUMBER AND CHARACTERISTICS OF

Name of the organization

UNITED WAY OF NEW YORK CITY

Employer identification number

13-2617681

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

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

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

THE 990 DRAFT IS REVIEWED WITH OUR AUDIT COMMITTEE. ONCE APPROVED, THE 990 IS PROVIDED ELECTRONICALLY TO THE ENTIRE BOARD FOR ITS REVIEW AND COMMENT AND THEN FILED WITH THE IRS.

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

UWNYC'S BOARD MEMBERS, OFFICERS, SENIOR EXECUTIVES AND CERTAIN OTHER DESIGNATED EMPLOYEES ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST DISCLOSURE STATEMENTS ANNUALLY AND HAVE AN OBLIGATION TO UPDATE SUCH STATEMENTS THROUGHOUT THE FISCAL YEAR. THE INFORMATION IS REVIEWED BY THE GENERAL COUNSEL AND CATALOGUED. RELATED PARTY ISSUES ARE REGULARLY SCRUTINIZED AND ADDRESSED AS PART OF THE GRANTMAKING PROCESS AND VENDOR SELECTION PROCESS. THE APPROPRIATE BOARD COMMITTEE REVIEWS THE PROPOSED TRANSACTION, REVIEWS THE RATIONALE AND COMPARABILITY DATA, AND DETERMINES WHETHER TO PROCEED. THE ORGANIZATION HAS PROTOCOLS TO BE FOLLOWED BY STAFF IN ORDER TO REVIEW AND ADDRESS CONFLICTS RELATING TO NON-EXECUTIVE STAFF MEMBERS.

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

THE CEO'S COMPENSATION IS RECOMMENDED BY THE COMPENSATION COMMITTEE, APPROVED BY THE EXECUTIVE COMMITTEE, AND REPORTED TO THE BOARD OF DIRECTORS. THE BOARD HAS BEEN ASSISTED BY PROFESSIONAL COMPENSATION CONSULTANTS, SULLIVAN AND COTTER. S&C GOES OUT TO THE MARKET AND REVIEWS THE COMPENSATION OF CEOS IN NOT ONLY SIMILARLY SITUATED ORGANIZATIONS, BUT OTHER ORGANIZATIONS TO WHICH UWNYC WOULD LOOK FOR A CEO IF THE NEED AROSE.

Name of the organization

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THIS INFORMATION IS ANALYZED AND THEN GIVEN TO THE COMPENSATION COMMITTEE FOR THEIR REVIEW. THE COMPENSATION COMMITTEE DETERMINES THE REASONABLENESS OF THE CEO'S COMPENSATION BASED ON THIS INFORMATION.

THE COMPENSATION OF KEY EMPLOYEES IS DETERMINED PURSUANT TO COMPENSATION COMMITTEE OVERSIGHT AND APPROVAL.

IN THE SPRING OF 2014, UNITED WAY OF NEW YORK CITY RETAINED THE COMPENSATION CONSULTING FIRM, SIBSON CONSULTING, TO PROVIDE GUIDANCE ON EXECUTIVE AND GENERAL STAFF COMPENSATION GOING FORWARD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

NY, NJ, CT, AL, AK, AR, CA, CO, DC, FL, GA, HI, IL, KS, KY, ME, MD, MI, MN, MS, NH, NM, NC, ND, OH, OK, OR, PA, RI, SC, TX, UT, VA, WA, WV, WI, MA

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

FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE. CONFLICTS OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PENSION RELATED CHANGES	-1,499,078.
PROVISION FOR UNCOLLECTIBLE RECEIVABLES	-644,912.
CHANGE IN PERPETUAL TRUST	-46,450.
TOTAL TO FORM 990, PART XI, LINE 9	-2,190,440.

FORM 990, PART XII, LINE 2C:

HAS NOT BEEN CHANGED FROM THE PRIOR YEAR.

Name of the organization

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13-2617681

FORM 990, SCHEDULE I, PART II:

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

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271

2015
Open to Public Inspection

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) **07/01/2015** and Ending (mm/dd/yyyy) **06/30/2016**

Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: UNITED WAY OF NEW YORK CITY	Employer Identification Number (EIN): 13-2617681
	Mailing Address: 205 EAST 42ND STREET	NY Registration Number: 01-42-62
	City / State / ZIP: NEW YORK, NY 10017	Telephone: 212 251-2500
	Website: WWW.UNITEDWAYNYC.ORG	Email:

Check your organization's registration category: 7A only EPTL only DUAL (7A & EPTL) EXEMPT

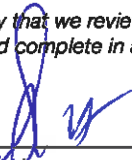
Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:


 Signature

SHEENA WRIGHT
 PRESIDENT/CEO
 Date: **5/12/17**

Chief Financial Officer or Treasurer:


 Signature

OSCAR RAPOSO
 EVP & CFO
 Date: **5/12/17**

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc, did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year. Or the organization qualifies for another 7A exemption (see instructions).

3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

Yes No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:

7A filing fee:	EPTL filing fee:	Total fee:
\$ <u>25.</u>	\$ <u>250.</u>	\$ <u>275.</u>

Make a single-check or money order payable to:
"Department of Law"

<h1 style="margin: 0;">CHAR500</h1> <p style="margin: 0;">Annual Filing Checklist</p>	<p>Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:</p> <ul style="list-style-type: none"> - Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3. - Your organization is registered as EPTL only and marked the EPTL filing exemption in Part 3. - Your organization is registered as DUAL and you marked <u>both</u> the 7A and EPTL filing exemption in Part 3.
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Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors).
- Our organization was eligible for and filed an IRS 990-N e-postcard. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- Review Report if you received total revenue and support greater than \$250,000 and up to \$500,000.
- Audit Report if you received total revenue and support greater than \$500,000
- No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- \$0, if you checked the EPTL exemption in Part 3b
- \$25, if the NET WORTH is less than \$50,000
- \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
 Charities Bureau Registration Section
 120 Broadway
 New York, NY 10271

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

CHAR500

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers
www.CharitiesNYS.com

2015

Open to Public
Inspection

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

1. Organization Information

Name of Organization:	NY Registration Number:
UNITED WAY OF NEW YORK CITY	01-42-62

2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
<input checked="" type="checkbox"/> Professional Fund Raiser	PREMIERE EVENTS PLUS, INC.	44-02-55
<input type="checkbox"/> Fund Raising Counsel	Mailing Address:	Telephone:
<input type="checkbox"/> Commercial Co-Venturer	1441 BROADWAY, SUITE 5001	212-843-0606
	City / State / ZIP:	
	NEW YORK, NY 10018	

3. Contract Information

Contract Start Date:	Contract End Date:
09/15/2015	09/15/2016

4. Description of Services

Services provided by FRP: EVENT MANAGEMENT - GRIDIRON GALA

5. Description of Compensation

Compensation arrangement with FRP: FIXED FEE ARRANGEMENT OF \$171,750	Amount Paid to FRP: 171,750.
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6. Commercial Co-Venturer (CCV) Report

<input type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).
A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).
A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

CHAR500

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers
www.CharitiesNYS.com

2015

Open to Public
Inspection

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

1. Organization Information

Name of Organization:	NY Registration Number:
UNITED WAY OF NEW YORK CITY	01-42-62

2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
<input checked="" type="checkbox"/> Professional Fund Raiser	JFM GROUP	42-79-23
<input type="checkbox"/> Fund Raising Counsel	Mailing Address:	Telephone:
<input type="checkbox"/> Commercial Co-Venturer	629 FIFTH AVENUE, STE 106	914-235-1490
	City / State / ZIP:	
	ELHAM NY 10803	

3. Contract Information

Contract Start Date:	Contract End Date:
09/10/2015	04/30/2016

4. Description of Services

Services provided by FRP: EVENT MANAGEMENT: WLC LUNCHEON

5. Description of Compensation

Compensation arrangement with FRP: FIXED FEE ARRANGEMENT OF \$55,000	Amount Paid to FRP: 55,000.
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6. Commercial Co-Venturer (CCV) Report

<input type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).
A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).
A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

CHAR500

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers
www.CharitiesNYS.com

2015

Open to Public
Inspection

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

1. Organization Information

Name of Organization:	NY Registration Number:
UNITED WAY OF NEW YORK CITY	01-42-62

2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
<input type="checkbox"/> Professional Fund Raiser	THE PROMETHEUS EXCHANGE LLC	
<input checked="" type="checkbox"/> Fund Raising Counsel	Mailing Address:	Telephone:
<input type="checkbox"/> Commercial Co-Venturer	170 EAST 88TH STREET, SUITE 6H	917-822-9991
	City / State / ZIP:	
	NEW YORK, NY 10128	

3. Contract Information

Contract Start Date:	Contract End Date:
09/01/2015	06/30/2016

4. Description of Services

Services provided by FRP:
FUNDRAISING COUNSEL

5. Description of Compensation

Compensation arrangement with FRP: HOURLY FEE ARRANGEMENT OF \$250 PER HOUR	Amount Paid to FRP: 106,355.
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6. Commercial Co-Venturer (CCV) Report

<input type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).
A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).
A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

<h1 style="margin: 0;">CHAR500</h1> <p style="margin: 0;">Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers www.CharitiesNYS.com</p>	<h2 style="margin: 0;">2015</h2> <p style="margin: 0;">Open to Public Inspection</p>
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If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

1. Organization Information

Name of Organization: UNITED WAY OF NEW YORK CITY	NY Registration Number: 01-42-62
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2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
<input type="checkbox"/> Professional Fund Raiser	MAX MARA	
<input type="checkbox"/> Fund Raising Counsel	Mailing Address:	Telephone:
<input checked="" type="checkbox"/> Commercial Co-Venturer	813 MADISON AVENUE	212-879-6100
	City / State / ZIP:	
	NEW YORK, NY 10065	

3. Contract Information

Contract Start Date: 10/04/2016	Contract End Date: 10/16/2016
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4. Description of Services

Services provided by FRP:

5. Description of Compensation

Compensation arrangement with FRP: 	Amount Paid to FRP: 0.
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6. Commercial Co-Venturer (CCV) Report

<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).
 A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).
 A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

CHAR500

Schedule 4b: Government Grants
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2015

Open to Public
Inspection

If you checked the box in question 4b in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule and list EACH government grant. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization:	NY Registration Number:
UNITED WAY OF NEW YORK CITY	01-42-62

2. Government Grants

Name of Government Agency	Amount of Grant
1. NEW YORK STATE OFFICE OF TEMPORARY & DISABILITY ASSIS	1. 813,636.
2. NEW YORK CITY DEPARTMENT OF EDUCATION	2. 16,370,683.
3. US DEPARTMENT OF HOMELAND SECURITY/EMERG. FOOD & SHEL	3. 81,987.
4. NEW YORK STATE DEPARTMENT OF HEALTH	4. 7,848,950.
5. NYS EDUCATION DEPARTMENT	5. 1,000,000.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total: 26,115,256.