

February 9, 2023

United Way Miami Inc. C/O Carlos G Molina 3250 SW 3rd Avenue Miami, FL 33129

United Way Miami Inc. C/O Carlos G Molina:

Enclosed are the original and one copy of the 2021 Exempt Organization return, as follows...

2021 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Please call us at any time should you have any questions relating to your tax situation, business, financial or estate planning or any other financial matters. As a part of your advisory team, we will be happy to assist you.

Tax or Professional advice contained in or accompanying this document, unless otherwise specifically stated, is not intended or written to be used, and cannot be used, for the purpose of (I) avoiding penalties under the Internal Revenue code, or (II) promoting, marketing, or recommending to another party any transaction or matter that is contained in or accompanying this document. In addition, unless otherwise specifically stated, any advice provided shall not be deemed a formal tax opinion upon which the addressee can rely.

We sincerely appreciate the opportunity to serve you. If you have any questions regarding the returns, please do not hesitate to call.

Sincerely,

Michael H Novak CPA



TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2022

Prepared For:

United Way Miami Inc. C/O Carlos G Molina 3250 SW 3rd Avenue Miami, FL 33129

Prepared By:

Marcum LLP One Southeast Third Ave, Suite 1100 Miami, FL 33131

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

If your tax return(s) are being electronically filed, we cannot release them until we have your signed authorization(s). After reviewing your return(s) for accuracy and completeness, please sign and email your authorization(s) to 8879.Florida@marcumllp.com or fax to (305) 995-9601. Our mailing address is One SE Third Avenue, Suite 1100 Miami, FL 33131.

Form 8879-TF

IRS e-file Signature Authorization for a Tax Exempt Entity

to calciforal year 2021, of fiscal year beginning	r calendar year 2021, or fiscal year beginning	${\sf JUL}$	1	, 2021, and ending	JUN	30	, 20 2
---	--	-------------	---	--------------------	-----	----	---------------

2

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

▶ Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879TE for the latest information.

UNITED WAY MIAMI INC.

EIN or SSN 59-0830840

CARLOS G MOLINA Name and title of officer or person subject to tax

CFO

Part I Type of Return and Return Information
--

C/O CARLOS G MOLINA

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I

1a	Form 990 check here > X	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	_. 1ь5 <u>5,112,888</u> .
2a	Form 990-EZ check here >	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a	Form 1120-POL check here ▶	b Total tax (Form 1120-POL, line 22)	3b
4a	Form 990-PF check here >	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a	Form 8868 check here >	b Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here >	b Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here >	b Total tax (Form 4720, Part III, line 1)	. 7b
8a	Form 5227 check here	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here	b Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II Declaration and Signat	ure Authorization of Officer or Person Subject to Tax	
Jnder p	penalties of perjury, I declare that $oxed{X}$	I am an officer of the above entity or I am a person subject to tax with res	spect to (name
of entity	<i></i>	, (EIN) and that I hav	e examined a copy of the
2021 el	ectronic return and accompanying sch	edules and statements, and, to the best of my knowledge and belief, they are tr	rue, correct, and

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. Lates at the financial institutions involved in the processing of the electronic later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box on

X I authorize MARCUM LLP	to enter my PIN	19276
ERO firm name		Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the

IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

gnature of officer or person subject to tax Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

60323337027

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

EXTENDED TO MAY 15, 2023

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

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

Open to Public Inspection

Α Ι	or un	e 2021 calendar year, or tax year beginning 000 1, 2021 and c	enaing U	<u>IUN 30, 2022</u>						
В	Check if applicab	C Name of organization UNITED WAY MIAMI INC.		D Employer identifi	cation number					
	Addre									
	Name			59-0830840						
F	Initial return		Room/suite	E Telephone numbe						
Г	Final	3250 GW 3PD AVENUE		305-860-3000						
	termi ated			G Gross receipts \$	85,130,212.					
	Amer return	ded MTAMT ET 22120	H(a) Is this a group re	eturn						
	Appli tion			for subordinates						
	pend	^{ng} 3250 SW 3RD AVENUE, MIAMI, FL 33129		H(b) Are all subordinates in						
Τ.	I Tax-exempt status: X 501(c)(3) 501(c) ()									
J	Webs	te: ► WWW.UNITEDWAYMIAMI.ORG		H(c) Group exemption	n number					
		f organization: X Corporation Trust Association Other	L Year	of formation: 1957	M State of legal domicile: ${f FL}$					
Pa	art I	Summary								
4	1	Briefly describe the organization's mission or most significant activities: $\underline{\text{THE}}$								
Activities & Governance		IS BUILDING THE COMMUNITY BY HELPING PEOP	LE CAI	RE FOR ONE A	NOTHER.					
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as:						
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	51					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	50					
8	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	233					
/itie	6	Total number of volunteers (estimate if necessary)		6	5000					
Ċ	7 a			7a	0.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.					
				Prior Year	Current Year					
Revenue	8	Contributions and grants (Part VIII, line 1h)	<u>1</u>	10,721,107.	50,414,009.					
	9	Program service revenue (Part VIII, line 2g)		816,730.	763,311.					
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,039,176.	3,073,485.					
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,139,855.	862,083.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	17,716,868.	55,112,888.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		69,787,158.	30,602,094.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
ű	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		15,566,908.	14,780,376.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
<u>B</u> e	. b	Total fundraising expenses (Part IX, column (D), line 25) 3,297,05	54.							
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,333,029.	8,443,094.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		91,687,095.	53,825,564.					
	19	Revenue less expenses. Subtract line 18 from line 12		26,029,773.	1,287,324.					
Net Assets or	9			ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)		47,985,978.	146,891,881.					
AS	21	Total liabilities (Part X, line 26)		56,822,723.	66,590,114.					
<u>S</u>	22	Net assets or fund balances. Subtract line 21 from line 20		91,163,255.	80,301,767.					
Pa	art II	Signature Block								
Und	ler pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of my	/ knowledge and belief, it is					
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge.						
Sign		Signature of officer		Date						
Her	е	CARLOS G MOLINA, CFO								
		Type or print name and title		- · · · -						
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN					
Paid		MICHAEL NOVAK MICHAEL NOVAK		self-employ						
	parer	Firm's name MARCUM LLP	4.0.0	Firm's EIN ▶	11-1986323					
Use	Only	Firm's address ONE SOUTHEAST THIRD AVE, SUITE 1	100		0=1 00= 000					
		MIAMI, FL 33131		Phone no. (3	05) 995-9600					
Ma	y the I	RS discuss this return with the preparer shown above? See instructions			X Yes No					

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA 59-0830840 <u> Page</u> **2** Form 990 (2021) Part III Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: THE MISSION OF UNITED WAY MIAMI IS TO BUILD THE COMMUNITY BY HELPING PEOPLE CARE FOR ONE ANOTHER. UNITED WAY BRINGS PEOPLE AND INSTITUTIONS TOGETHER TO IMPROVE THE EDUCATION, FINANCIAL STABILITY AND HEALTH OF OUR COMMUNITY AND ITS RESIDENTS. Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 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 18,037,691. including grants of \$ 6,026,411.) (Revenue \$ 540,966. 4a) (Expenses \$ 5,879 CHILDREN RECEIVED QUALITY EARLY EDUCATION EXPERIENCES; 896 EARLY CHILDHOOD PROFESSIONALS RECEIVED 4,314 HOURS OF PROFESSIONAL LEARNING; 9,705 YOUTH ATTENDED AFTER-SCHOOL PROGRAMS THAT ENABLED THEM TO IMPROVE ACADEMIC SKILLS AND AVOID RISKY BEHAVIORS, SUCH AS DRINKING, ALCOHOL, SMOKING AND TAKING DRUGS. SUCCESSFULLY ADVOCATED FOR EARLY LEARNING AND K-12 EDUCATION EACH RECEIVED SIGNIFICANT INCREASES TO BASE STUDENT ALLOCATION (BSA) AND EXTRA FUNDS TO SUPPORT TEACHER WAGES. THE K-12 BSA INCREASED BY \$214.49 TO ABOUT \$4,587.40 PER PUPIL, PLUS \$800 MILLION TO INCREASE TEACHER WAGES TO A MINIMUM OF \$47,500 WITH 50% GOING TO NEW HIRES AND 50% GOING TO VETERAN TEACHERS. THE VPK BSA INCREASED BY \$317 TO \$2,803 PER PUPIL FOR 3-HOURS PER DAY PRESCHOOL - PLUS \$100 MILLION TO SUPPORT ADDITIONAL PAYMENTS TO PROGRAMS THROUGH THE EARLY LEARNING 2,949,182. including grants of \$ 1,550,563.) (Revenue \$) (Expenses \$ 63,450 PEOPLE RECEIVED EMERGENCY FOOD AND SHELTER ASSISTANCE; INDIVIDUALS AND FAMILIES RECEIVED COUNSELING THAT WILL ENABLE THEM TO IMPROVE THEIR FINANCIAL STABILITY AND ACHIEVE THEIR GOALS; IN 2022, A TOTAL OF 6,582 MIAMI-DADE TAXPAYERS RECEIVED TAX REFUNDS TOTALING OVER \$11 MILLION AND EARNED INCOME TAX CREDITS OF ALMOST THAN \$4 MILLION, SAVING \$1.3 MILLION IN TAX PREPARATION FEES; 1,379 VETERANS AND THEIR FAMILIES RECEIVED FOOD ASSISTANCE THROUGH UNITED WAY'S MISSION UNITED. THE SADOWSKI HOUSING TRUST FUNDS WERE FULLY APPROPRIATED FOR THE FLORIDA HOUSING FINANCE CORPORATION, WHICH MANAGES THE PROGRAMS SHIP AND SAIL, WILL RECEIVE \$362,725,000, \$209,475,000 FOR SHIP AND \$53,250,000 FOR SAIL. THE REMAINING \$100,000,000 WILL CREATE A NEW HOMETOWN HERO HOUSING PROGRAM, WHICH PROVIDES DOWN PAYMENT, AND CLOSING 4,692,186. including grants of \$ 3,400,831.) (Revenue \$ 22,689 PEOPLE ACCESSED CARE TO IMPROVE THEIR PHYSICAL, MENTAL OVER EMOTIONAL HEALTH NEEDS. 8,956 OLDER ADULTS RECEIVED ASSISTANCE TO REMAIN HEALTHY AND ACTIVE. 1,809 CHILDREN ENGAGED IN HEALTHY EATING, FITNESS AND PLAY; EMBARKED IN DIVERSITY, EQUITY, AND INCLUSION (DEI) EFFORTS TO ADDRESS HEALTH DISPARITIES IN OUR COMMUNITY. UTILIZING A MULTI-PRONGED APPROACH, VOLUNTEER HEALTH IMPACT COUNCIL WORKED WITH A LOCAL DEI EXPERT, NATALIE ROBINSON BRUNER OF GLADED LEADERSHIP SOLUTIONS, TO CRAFT A VARIETY OF TRAINING OPPORTUNITIES FOR THE AGENCIES. THESE INCLUDED A CAPACITY BUILDING GRANT, AWARDED TO FOUR AGENCIES FOR COMPLETION OF SPECIFIC DEI PROJECTS; A TECHNICAL ASSISTANCE AWARD WHICH PROVIDED GRANTEES WITH HOURS OF CONSULTING WITH A TRAINER; A LEADERSHIP TRAINING SERIES,

Other program services (Describe on Schedule O.)

20 , 077 , 451 $_{\bullet}$ $\,$ including grants of $\!\!\!\!$ 19,624,289.) (Revenue \$

45,756,510.

Form 990 (2021)

09340209 150872 164651

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III	l °		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	ا ا	v	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	Х	
	Gordon Gordon Corractor, Gordon (79), mile 1: 11 165. Complete Gorleuule I, Faits I and II			L

Form 990 (2021) C/O CARLOS G MOLINA
Part IV Checklist of Required Schedules (continued)

			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete			
		23	Х	
04 -	Schedule J	23	21	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> X</u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		х
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
2 5a		05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
27				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			٠,,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
C	•	00-		x
	"Yes," complete Schedule L, Part IV	28c	37	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33			v	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-		36		x
27	If "Yes," complete Schedule R, Part V, line 2	30		 ^
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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par	t 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
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		. 50	
	Enter the fidulation of Fernanda and Financial Control of the Capping and Capp	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

132004 12-09-21

Form 990 (2021) C/O CARLOS G MOLINA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

a Initiation fees and capital contributions included on Part VIII, line 12						Yes	No	
b If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: if the sum of lines 1 and 2a is greater than 505, your may be required to g(ib. See instructions. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes, * that filled growing the calendary year, did the organization have an unrelated business gross income of \$1,000 or more during the year? 3b If Yes, * that filled growing the calendary year, did the organization have an interest in, or a significant or or Schedule O 3c If Yes * the time of the organization are a shark account; securities account; or other financial account? 5c If Yes * to line 5 a rob, the frequency that is a party to a prohibited tax whether transaction or the same of the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes * to line 5 as 7 bb, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes * to line 5 as 7 bb, did the organization that it was or is a party to a prohibited tax shelter transaction solicit any confribution that were not tax deductibles a charaltable contributions? 6c If Yes * to line 5 as 7 bb, did the organization include with every solicitation an express statement that such contributions orgits were not tax deductibles a charaltable contributions? 6c If Yes * to line organization include with every solicitation under section 170(c). 6d If Yes, * did the organization include with every solicitation under section 170(c). 6d If Yes, * did the organization include with every solicitation and express statement that such contributions orgits were not tax deductibles a formatically the contributions of under solicitation and party for goods and services provided to the page? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes, * indicate the number of Forms \$282 filed during the year 7d If the organization receive any part	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-yie. See instructions. 3		filed for the calendar year ending with or within the year covered by this return	2a	233			l	
3a DL the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes, Find a Form \$001 for this year? "If yo'r tole 5b, provide an explenation of Schedule 0 4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a firmarcial account; or cher the name of the foreign country by See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c Was the organization aparty to a prohibited tax shorter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shorter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are namely greater than \$100,000, and did the organization solicit any contributions that were not tax deductible a charitable contributions? 6c If Yes' to file the organization include with every solicitation an express statement that such contributions orgitts were not tax deductible a charitable contributions? 6c If Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible a small party sac accident that such contributions or gifts were not tax deductible as make party as a contribution organization receive a payment in excess of SS make party as a contribution organization receive a payment in excess of SS make party as a contribution or the value of the goods or services provided? 7c Organization selected accordibly the donor of the value of the goods or services provided? 7d If Yes, indicate the number of Forms 8282 filed during the year 7d If Yes, indicate the number of Forms 8282 filed during the year 8 Did the organization receive an orotibution of qualified intellectual property, did the organization file Form 8893 as required? 7d If Yes, indicate the number of Forms 8282 filed during the year; 9 Did the organization received a contribution of can, boats, airplanes,	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х		
b If "Yes," also it filled a Form 900-T for this year? If "No' to line 3b, provide an explanation on Schedule O A any time during the calendary 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 accountry? 4a		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction	s					
4a At any time during the calendary 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 park account, securities account, or other financial accounts (FBAR). 5a Vas the organization ap any to a prohibited tax shelter transaction at any time during the tax year? 5a Vas the organization ap any to a prohibited tax shelter transaction at any time during the tax year? 5b If Year to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Year to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Year to line 5a or 5b, did the organization the organization the fire missible. The organization shelt have organization that was one scharable contributions? 5c If Year, and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charabled contributions? 6c If Year, and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charabled contribution and partly for goods and services provided to the payor? 5c If Year, and the organization nective that down or the value of the goods or services provided? 6c If Year, and the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7c If Year, and the organization receive and partly the donor of the value of the goods or services provided? 7c If Year, and the organization receive and partly the donor of the value of the goods or services provided? 7c If Year, and the organization receives any funds, directly or indirectly, to a personal benefit contract? 7d If Year, and the organization receives any funds, directly or indirectly, to a personal benefit contract? 7d If Year, and the organization receives any funds, directly or indirectly, to a persona	За	2 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
financial account in a foreign country (such as a bank account, exertises account, or other financial account)? See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). So Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" to line Sa of Sb, did the organization file Form 8868-7? So Li if "Yes" did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). But the organization sale apyment in access of \$75 made party is a contribution and party for goods and services provided to the payor? To Li if "Yes," did the organization notify the donor of the value of the goods or services provided? To Li if the organization selection provided to the payor? But If "Yes," did the organization provided and provided to the payor? If If yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Li the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-0? Sonosoning organization have excess business holdings at any time during the year? Sonosoning organization have excess business holdings at any time during the year? Sonosoning organization have excess business holdings at any time during the year? Socion SOI(c)(17) organizations. Enter: In Intitation fees and capital contributions included on Part VIII, line 12, for public use of club facilities Gross i	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b			
b If "Yes," enter the name of the foreign country \$\frac{\text{Sea}}{ search controls for filing requirements for FriCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a I was the organization and party to a prohibited tax shelter transaction? 5b I was the organization to be a prohibited tax shelter transaction at any time during the tax year? 5c I "Yes' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c I "Yes' to line 5a or 5b, did the organization from 8868-17 form 8868-17 6c Boss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charitable contributions? 6c Bost the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Bost I "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and party for goods and services provided to the payor? 7c Bost I "Yes," indicate the number of forms 8828 filed during the year 8c Bost I "Yes," indicate the number of Forms 8822 filed during the year 9c Both the organization received a contribution of underly, to pay premiums on a personal benefit contract? 9c If the organization received a contribution of underly, to pay premiums on a personal benefit contract? 9c If the organization received a contribution of cars, boats, sirplanes, or other vehicle, did the organization file a Form 1096-07 9c Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations make and distribution to a donor, donor advised fund maintained by the sponsoring organizations make and distribution to a donor, donor advised fund the organization file a Form 1096-07 9c Section 501(c)(f) organizations. Enter: 1a initiation fees and capital contributions	4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
See instructions for filing requirements for FinCRN Form 114. Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 6 If "Yes" to line Se or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 B X 5 D Ces the organization have enaula gross recipits that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 B If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization shat may receive deductible contributions under section 170(c). 8 If Yes," did the organization notify the donor of the value of the goods or services provided? 9 If Yes," did the organization notify the donor of the value of the goods or services provided? 10 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 Did the organization received a contribution of qualified intellectual property, old the organization received a contribution of qualified intellectual property, old the organization file a Form 1098-C? 12 Sponsoring organization small tailing donor advised funds. 13 Sponsoring organization maintaining donor advised funds. 14 Sponsoring organization have excess business holdings at any time during the year? 15 Sponsoring organization have excess business holdings at any time during the year? 16 Sponsoring organization have excess business holdings at any time during the year? 17 Sponsoring organization have excess business holdings at any time during the year? 18 Sponsoring organization maintaining donor advised funds. 19 Section 501(c)(7) organizations and distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 11 In the organization in the maintaining donor advised funds. 11 Section		financial account in a foreign country (such as a bank account, securities account, or other financial account)?						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization file Form 888617? 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 deductibles? 6a Washington any contributions that were not tax deductibles as charitable contributions? 6b Washington and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 9 If "Yes," idid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contribution or orth evalue of the goods or services provided? 7 If Washington and the organization receive a payment in excess of \$75 made party is a contribution or qualified intellectual property, or which it was required to file Form 88862 filed during the year? 9 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If Wes, "indicate the number of Forms 88262 filed during the year? 10 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 If the organization received any funds, directly or indirectly, on a personal benefit contract? 12 If the organization received any contribution of qualified intellectual property, did the organization file Form 1098-C? 13 Sponsoring organizations make a distribution of the organization file Form 1098-C? 14 If the organization received any contribution o	b	• • • • • • • • • • • • • • • • • • • •						
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	ts (FBAR).				
c 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 deductibles on the contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organizations that may receive deductible contributions under section 170(c). b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Did the organization sell, exchange, or otherwise dispose of tangbile personal property for which it was required to file Form 8282? 7 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? 7 Did the organization received a payment in excess of \$75 made partly as a contribution of the goods or services provided? 7 Did the organization received a good of the value of the goods or services provided? 7 Did the organization received a good of the value of the goods or services provided? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098-0? 8 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098-0? 9 Sponsoring organizations make any taxable durinds. a Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4986? b Did the sponsoring organization make any taxable distributions under section 498	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a			
6a Des 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? b 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). 8 Did the organization sective a gayment in excess of \$75 mate parity as a contribution on parity for goods and services provided to the payor? 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 10 If "Yes," indicate the number of Forms 8282 filed during the year 2 If If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8393 as required? 9 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 17 The theory organization received a contribution of dividenction, on a personal benefit contract? 18 Sponsoring organization marking maintaining donor advised funds. 19 Sponsoring organization marking maintaining donor advised funds. 10 Did the sponsoring organization make any taxable distributions under section 4966? 10 Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 10 Gross income from members or shareholders 11 a Section 4947(k)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 11 Section 4947(k)(1) non-exempt theritable trusts. Is the organization filing Form 990 in lieu of Form 1041? 11 Section 4947(k)(1) non-exempt theritable trusts. Is the organization mus							<u> </u>	
any contributions that were not tax deductible as charitable contributions? b 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). a Did the organization receive a pyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 C X d if "Yes," indicate the number of Forms 8282 filed during the year P Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 P Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 I Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 I He organization received a contribution of acus, boats, singlenes, or other vehicles, did the organization file Form 198-C? 8 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organizations maintaining donor advised funds. 10 Did the sponsoring organization make any attribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12 c Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them). 12a Section 501(c)(29) qu					5с		<u> </u>	
b 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). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X X C Did the organization notify the clonor of the value of the goods or services provided? 7b b if "Yes," idld the organization notify the clonor of the value of the goods or services provided? 7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 6b life Form 8282? 7c J X X T S S S S S S S S S S S S S S S S S	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit				
were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Ibit the organization service a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Tax		,			6a		<u> </u>	
7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 A X 5 b If "Yes," of the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 b If \$7 \times X\$ 5 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 d If "Yes," indicate the number of Forms 8282 filed during the year 8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 9 Sponsoring organizations maintaining doorn advised funds. Did a doorn ad	b		ons o	gifts				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X X C Did the organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, pay premiums, directly, to pay premiums on a personal benefit contract? 7c X The payor of the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8289 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8289 as required? h if the organization make a distribution to a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make and sidsribution to a donor, donor advisor, or related person? 9 Sponsoring organization make a distribution to a donor advisor, or related person? 9 Sponsoring organizations included on Part VIII, line 12 Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 10 Section 501(c)(29) qualizations. Enter: a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 501(c)(29) qualization incomation the organization filing Form 990 in lieu of Form 1041? 12 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization incessed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the am					6b			
b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Id If "Yes," indicate the number of Forms 8282 filed during the year Td Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7						37		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8990 as required? 8 ponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 49667 9 Sponsoring organization make any taxable distributions under section 49667 9 Did the sponsoring organization make any taxable distributions under section 49667 9 Did the sponsoring organization make any taxable distributions under section 49667 9 Did the sponsoring organization make and stiribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders b If Yes, "enter the amount of tax-exempt interest received or accrued during the year 11a 12b 15c Section 501(c)(21) qualified neaprofit health insurance issuers. a Is the organization ilicensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves on hand 15d If "Yes," enter the amount of reserves on hand 15d If "Yes,"			rvices	rovided to the payor?				
to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 but the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 but the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 but the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 8 ponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 ponsoring organization make any taxable distributions under section 4966? 9 but the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 ponsoring organization make any taxable distributions under section 4966? 9 but the sponsoring organization make any taxable distribution under section 4966? 9 but the sponsoring organization make any taxable distribution under section 4966? 9 but the sponsoring organization make any taxable distribution under section 4966? 9 but the sponsoring organization make any taxable distribution under section 4966? 9 but the sponsoring organization make any taxable distribution under section 4966? 9 but the sponsoring organization section form section the section 501(c)(12) organizations. Enter: a fire from 8047(a)(1) organizations. Enter: a fire from 8047(a)(1) organizations. Enter: a fire from 8047(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a but from 9047(a)(1) organizations that the section 4960 fax on payments form 904 fax organization section 1041? 12b but from 9047(a)(1) organization subject to report these payments? If "No," provide an explanation on Schedule O 14a but the organization subject to the section 4960 f		, , , , , , , , , , , , , , , , , , , ,			7b	_X_	 	
d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7	С		as req	uired			37	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10a 10b Section 501(c)(7) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b 17 'Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Fiter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning service			 I	 I	7c		┝┻┈	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f 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, bosts, 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? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter: a linitiation fees and capital contributions included on Part VIII, line 12 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 Section 501(c)(12) organizations. Enter: a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization incensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? 13 Did the organization receive any payments for indoor tanning services during the tax year? 14 Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000				•	_			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organization smaintaining donor advised funds. 9 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make and stribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 section 501(c)(12) organizations. Enter: a 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? If "Yes," erre the amount of tax-exempt interest received or accrued during the year 12b 13a Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a	_			ť?			 	
h 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? 9 Sponsoring organization make any taxable distributions under section 4966? 9 b Did the sponsoring organization make any taxable distributions under section 4966? 9 b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders b Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13				00				
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make any taxable distributions under section 4966? 9 b Did the sponsoring organization make and istribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves on hand 13a 14a							 	
sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. bid the sponsoring organization make a distribution under section 4966? bid the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization and educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(12) organizations. Did the trust, any disqualified person, or mine operator engage in	_				/11			
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	Ü		•		a			
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from there sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 11b 11c 12a 12b 11 *Yes,* enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization receive any payments for indoor tanning services during the tax year? 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 exc	9							
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?					9a			
Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Inotection 501(c)(12) organizations. Enter: Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization lieu of Form 1041? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization in flie organization in more than one state? Inotection 501(c)(2)(29) qualified nonprofit health plans in more than one state? Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization in flie form 4720, Schedule N. Inotection 4947(a)(1) non-exempt charitable trusts. Is the organization in reduction and file Form 4720, Schedule N. Inotection 4947(a)(1) non-exempt end for the file of the								
a Initiation fees and capital contributions included on Part VIII, line 12								
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization and educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		1 W. C.	10a				l	
a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c bif "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X Figure 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		•	10b				l	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 13c 14a 2	11	Section 501(c)(12) organizations. Enter:						
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 13c 14a 2	а	Gross income from members or shareholders	11a				l	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17								
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17								
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17	12a		1041	?	12a			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 13a 13b 13b 13c 14a X X X X If "Yes," complete Form 4720, Schedule O. 15 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				l	
Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 Total Amount of reserves the organization is required to maintain by the states in which the organization is required to maintain by the states in which the organization of an excise tax under section 4961 and the states in which the organization of an excise tax under section 4951, 4952 or 4953?	13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 In the organization is licensed to issue qualified to maintain by the states in which the section which the section which the section of the section	а				13a			
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?							l	
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	b			1			l	
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18							l	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 In "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 18 In "Yes," complete Porm 4720, Schedule N. 19 In "Yes," complete Form 4720, Schedule O. 10 In The Indiana Port In			13c					
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 X X X X If "Yes," see the instructions and file Form 4720, Schedule N. If "Yes," complete Form 4720, Schedule O.							<u> </u>	
excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 X 19 X 19 X 10 X 11 X 12 X 13 X 14 X 15 X 16 X 17 X 18 PARITHER ARCHARGE STATE S							<u> </u>	
If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 Yes," see the instructions and file Form 4720, Schedule N. 19 Yes," see the instructions and file Form 4720, Schedule N. 10 Yes, "See the instructions and file Form 4720, Schedule N. 11 Yes, "See the instructions and file Form 4720, Schedule N. 12 Yes, "See the instructions and file Form 4720, Schedule N. 13 Yes, "See the instructions and file Form 4720, Schedule N. 14 Yes, "See the instructions and file Form 4720, Schedule N. 15 Yes, "Complete Form 4720, Schedule O. 16 Yes, "Seetion 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 Yes, "See the instructions and file Form 4720, Schedule N. 18 Yes, "See the instructions and file Form 4720, Schedule N. 19 Yes, "See the instructions and file Form 4720, Schedule N. 19 Yes, "See the instructions and file Form 4720, Schedule N. 10 Yes, "See the instruction and educational institution subject to the section 4968 excise tax on net investment income? 10 Yes, "See the instruction and educational institution subject to the section 4968 excise tax on net investment income? 11 Yes, "See the instruction and educational institution subject to the section 4968 excise tax on net investment income? 11 Yes, "See the instruction and education and	15						v	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 18 X							Λ	
If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17	40		L ! ·	0	40		v	
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17	16		t incoi	ne?	16		$\hat{}$	
activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	47		on: :					
	17				47			
If "Ves." complete Form 6069		activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.			17			

C/O CARLOS G MOLINA 59-0830840 Form 990 (2021) 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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 51 **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 on Schedule O. 50 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a 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? Х Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a 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 99	90 is required to	be filed	▶FL
----	-----------------	-------------------	-----------------	-------------------	----------	-----

18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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.

X Another's website X Own website X Upon request Other (explain on Schedule O)

Describe on 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	>
	CARLOS G MOLINA - 305-646-7065	
	3250 SW 3RD AVENUE, MIAMI, FL 33129	

Form **990** (2021)

Form 990 (2021) 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do		Pos	itior		200	Reportable	Reportable compensation	Estimated
	hours per	box	, unle	ss per	son i	than o	an	compensation		amount of
	week		cer ar	id a di	irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		99	ubeus		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual tr	tional		nploy	st con	_	1099-1120)		organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MARIA ALONSO	40.00	_	_		_	1 0	-			
FORMER PRESIDENT & CEO							Х	373,083.	0.	31,966
(2) CARLOS G. MOLINA	40.00									-
CHIEF FINANCIAL & ADMINISTRATIVE OFF				Х				210,927.	0.	29,856
(3) MARY DONWORTH	40.00									
CHIEF PROGRAM OFFICER				Х				191,401.	0.	24,258
(4) CRISTINA BLANCO	40.00									
CHIEF COMMUNICATIONS OFFICER				Х				178,902.	0.	17,583
(5) NORIE DEL VALLE	40.00	-						155 105	•	45 454
CHIEF DEVELOPMENT OFFICER	40.00			Х				177,127.	0.	17,471
(6) CELIO ROMANACH	40.00	-						165 061	•	10 140
CHIEF MARKETING OFFICER	40.00			Х				165,061.	0.	12,149
(7) OCTAVIO "JOE" ZUBIZARRETA	40.00	-		7.7				36 360	0.	F FF0
INTERIM PRESIDENT & CEO (8) JAYNE ABESS, EMERITUS	1.00			Х				36,260.	0.	5,558
DIRECTOR	1.00	Х						0.	0.	0
(9) ALEX P. ADAMS	1.00	Λ						0.	0.	0
DIRECTOR	1.00	х						0.	0.	0
(10) SHELDON T. ANDERSON	1.00								•	•
DIRECTOR		х						0.	0.	0
(11) ANDREW L. ANSIN	1.00							-	-	-
DIRECTOR		Х						0.	0.	0
(12) PETER L. BERMONT	1.00									
DIRECTOR		Х						0.	0.	0
(13) SAM BLATT	1.00									
DIRECTOR		Х						0.	0.	0
(14) STEVEN J. BRODIE, ESQ. EMERITUS	1.00									
DIRECTOR		Х						0.	0.	0
(15) ALFRED A. BUNGE	1.00	1								
DIRECTOR		Х						0.	0.	0
(16) CAMILA COTE	1.00	ļ							_	_
DIRECTOR	1 00	Х						0.	0.	0
(17) ALBERT DE CARDENAS	1.00								•	_
DIRECTOR	L	X						0.	0.	0 Form 990 (202

Form 990 (2021)

FOIII 990 (2021) C/O CAINE	DD G MOL	1 T T/	177						33 0030	O-EO Fage O
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Name and title Average hours per week Average box, unles officer an		ss per	more son i	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) DR. LILIA C. DIBELLO	1.00									
DIRECTOR		Х						0.	0.	0.
(19) ALAN T. DIMOND DIRECTOR	1.00	Х						0.	0.	0.
(20) EDDIE DOMINGUEZ	1.00									
DIRECTOR		Х						0.	0.	0.
(21) BALDWYN ENGLISH JR.	1.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(22) MIGUEL G. FARRA DIRECTOR	1.00	х						0.	0.	0.
(23) JOSE K. FUENTES	1.00									
DIRECTOR		Х						0.	0.	0.
(24) LUIS M. GAMONEDA DIRECTOR	1.00	х						0.	0.	0.
(25) CALIXTO J. (CALI) GARCIA-VELEZ DIRECTOR	1.00	X						0.	0.	0.
(26) BRIAN Y. GOLDMEIER	1.00									
DIRECTOR		х						0.	0.	0.
1b Subtotal							▶	1,332,761.	0.	138,841.
c Total from continuation sheets to Part V	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	1,332,761.	0.	138,841.
2 Total number of individuals (including but r	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	_

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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

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

5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BDO DIGITAL, 1450 BRICKELL AVENUE, SUITE		
1800, MIAMI, FL 33131	IT SERVICES	312,560.
CONDOR SERVICES & MAINTENANCE		
15475 SW 146TH STREET, MIAMI, FL 33196	CLEANING SERVICES	258,639.
AMERICA SERVICE INDUSTRIES		
PO BOX 171240, MIAMI, FL 33017	CLEANING SERVICES	223,178.
PETE DIAZ PRODUCTIONS, INC.	EVENT PRODUCTION	
PO BOX 441535, MIAMI, FL 33144	SERVICES	210,700.
CUSTOM PROTECTION SERVICES, INC.		
2510 NW 97 AVENUE, MIAMI, FL 33172	SECURITY SERVICES	194,527.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization ▶ 10		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

Form 990 C/O CARLO										0840
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, an	nd H	lighe	est (Compensated Employe	ees (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi	tion			Reportable	Reportable	Estimated
	hours	(c	heck	all t	hat	appl	y)	compensation	compensation	amount of
	per							from	from related	other
	week	'n				loyee		the	organizations	compensation from the
	(list any hours for	direct				d em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	related	3e or 0	stee			ısatec		(***-2/1099-141130)		and related
	organizations	truste	al trus		yee	om per				organizations
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er			Ü
	line)	Indi	Insti	Officer	Key	High	Former			
(27) FRANCISCO "PACO" GONZALEZ	1.00									
DIRECTOR		Х						0.	0.	0.
(28) FRANK GONZALEZ	1.00									
DIRECTOR		Х						0.	0.	0
(29) XAVIER GONZALEZ	1.00									
DIRECTOR		Х						0.	0.	0.
(30) MELISSA GRACEY	1.00									
DIRECTOR		Х						0.	0.	0 .
(31) KIM Y. GRIFFIN-HUNTER	1.00									
DIRECTOR		Х						0.	0.	0 .
(32) JASON JENKINS	1.00									
DIRECTOR		Х						0.	0.	0 .
(33) SETH R. KAPLAN	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(34) JESS LAWHORN JR.	1.00									
DIRECTOR		Х						0.	0.	0 .
(35) JUAN CARLOS LISCANO	1.00	ļ								
DIRECTOR	1 00	Х						0.	0.	0 .
(36) AMINDA "MINDY" MARQUES GONZALEZ	1.00								•	•
DIRECTOR	1 00	Х		-				0.	0.	0
(37) JOSE R. MAS	1.00	.,							0	
DIRECTOR	1 00	Х						0.	0.	0
(38) KARLA HERNANDEZ-MATS	1.00	٠,,							0	
DIRECTOR CANADA	1 00	Х						0.	0.	0 .
(39) PATRICIA MENENDEZ-CAMBO	1.00	. ,							0	0
DIRECTOR	1 00	Х		-				0.	0.	0 .
(40) NANCY A. MEYER	1.00	х						0.	0	0
DIRECTOR (41) CARLOS A. MIGOYA	1 00	Λ		-				0.	0.	0
DIRECTOR	1.00	Х						0.	0	0
	1 00	Λ		-				0.	0.	0 .
(42) DARRELL W. PAYNE DIRECTOR	1.00	х						0.	0.	0 .
(43) THOMAS J. PELHAM	1.00	Λ		\vdash				J •	0.	U .
DIRECTOR	1.00	Х						0.	0.	0 .
(44) FERNANDO PEREZ	1.00	22		\vdash				· ·	0 •	<u> </u>
DIRECTOR	1.00	Х						0.	0.	0 .
(45) JERRY PLUSH	1.00	25		\vdash				•	0 •	
DIRECTOR	1.00	Х						0.	0.	0
(46) SUSAN POTTER-NORTON, ESQ.	1.00			\vdash					0 •	0
, , , , , , , , _	<u> </u>	Х	I					0.	0.	0.

Form	990

Form 990 C/O CARI	LOS G MOL	1 T T/	ıA						59-083	0040
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average			(C Posi	C) ition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	stee or director	lnstitutional trustee	all t	Key employee	Highest compensated employee	Former Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(47) GLADYS REED DIRECTOR	1.00	х						0.	0.	0.
(48) JERRY REED	1.00	Λ						0.	0.	0 (
DIRECTOR		х						0.	0.	0
(49) PATRICIA ROSELLO DIRECTOR	1.00	Х						0.	0.	0
(50) DUANY RUIZ	1.00	Δ						0.	0.	0 .
DIRECTOR	1.00	Х						0.	0.	0
(51) CARMEN SABATER DIRECTOR	1.00	х						0.	0.	0
(52) ROBERT E. SANCHEZ	1.00	Λ	\vdash					0.	U •	U
DIRECTOR	1.00	Х						0.	0.	0 .
(53) GENE MATTHEW SCHAEFER	1.00									
DIRECTOR		Х						0.	0.	0 .
(54) DAVID M. SEIFER	1.00									
DIRECTOR		Х						0.	0.	0 .
(55) PENELOPE S. SHAFFER, PH.D.	1.00									
DIRECTOR		Х						0.	0.	0 .
(56) JAY A. STEINMAN DIRECTOR	1.00	х						0.	0.	0
(57) RASHAD THOMAS	1.00	Λ						0.	0.	0
DIRECTOR	1.00	Х						0.	0.	0 .
(58) JOHN C. SUMBERG	1.00	-25						•	•	-
DIRECTOR		х						0.	0.	0 .
(59) MIKE VALDES-FAULI	1.00							-	-	
DIRECTOR		Х						0.	0.	0 .
(60) ANA VEIGAMILTON	1.00	.,							0	•
DIRECTOR		Х						0.	0.	0.
		-								
		1	l			l	l	I		

Form 990 (2021) C/O CAR
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
			,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
S (0	1 .	Federated campaigns 1a					
ant	1 4						
Ę g	'		1,578,296.				
ts, Ar	(9	1,370,230.				
igi.	•	d Related organizations 1d					
ns, Sim	•	Government grants (contributions)					
er	1	All other contributions, gifts, grants, and					
ję t		similar amounts not included above 1f	48,835,713.				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines 1a-1f 1g \$	1,865,959.				
g G	-	Total. Add lines 1a-1f	>	50,414,009.			
			Business Code				
ė	2 8			540,966.	540,966.		
r V	ŀ	FISCAL AGENT FEES		222,345.	222,345.		
Se	(
am	(1					
Program Service Revenue		•					
Pr	1	All other program service revenue					
		Total. Add lines 2a-2f	•	763,311.			
	3	Investment income (including dividends, interes					
		other similar amounts)		2,280,380.			2280380.
	4	Income from investment of tax-exempt bond pr		, ,			
	5	Royalties					
	3	(i) Real	(ii) Personal				
	6		(ii) i crooriai				
		Rental income or (loss) 6c 690,144.		600 144			600 144
		d Net rental income or (loss)	(::) Oth a::	690,144.			690,144.
	7 8	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 29,748,754.					
	ŀ	Less: cost or other basis					
ine		and sales expenses					
ver	(Gain or (loss) 7c 793,105.					
Re		d Net gain or (loss)		793,105.			793,105.
her Revenue	8 8	a Gross income from fundraising events (not					
₹		including \$1,578,296. of					
		contributions reported on line 1c). See					
		Part IV, line 18	1,166,586.				
	ı	Less: direct expenses 8b	1,050,218.				
		Net income or (loss) from fundraising events		116,368.			116,368.
		Gross income from gaming activities. See					
		Part IV, line 19 9a					
	ŀ	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		a Gross sales of inventory, less returns					
		and allowances 10a					
	,	Less: cost of goods sold 10b					
	•	Net income or (loss) from sales of inventory	Business Code				
sn	44	OTHER MISCELLANEOUS REVENUE	Duomiess Ooue	55,571.	55,571.		
je j	11 a	· ————————————————————————————————————		33,311.	33,3/1.		
Miscellaneous Revenue	'						
sce Be	(All all and an annual and an					
Ξ	•	All other revenue		EC 571			
		e Total. Add lines 11a-11d	P	55,571.	010 000		200000
	12	Total revenue. See instructions	▶	55,112,888.	818,882.	0.	3879997.

Form 990 (2021) C/O CARLOS G : Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp		-	nplete column (A).	
	Check if Schedule O contains a respor	/ * ` `		(0)	(D)
	not include amounts reported on lines 6b, 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	30,602,094.	30 602 004		
_	and domestic governments. See Part IV, line 21	30,002,094.	30,602,094.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	1,720,263.	1,058,885.	378,045.	283,333
6	Compensation not included above to disqualified	1772072001	1,030,0031	37070131	200,000
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	10,281,888.	6,328,879.	2,259,546.	1,693,463
8	Pension plan accruals and contributions (include	,,	2,320,0,30	_,,	_,,,,,,,,
_	section 401(k) and 403(b) employer contributions)	452,634.	306,279.	83,231.	63.124
9	Other employee benefits	1,355,516.	917,221.	249,254.	63,124 189,041
10	Payroll taxes	970,075.	618,992.	193,821.	157,262
11	Fees for services (nonemployees):	•	,	,	•
а					
b	Legal	280,452.	197,850.	50,686.	31,916
С	Accounting	90,760.	64,028.	16,403.	10,329
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	1,972,017.	1,391,198.	356,403.	224,416
12	Advertising and promotion	300,478.	147,714.	78,072.	74,692
13	Office expenses	166,654.	81,926.	43,301.	41,427
14	Information technology	254,167.	124,947.	66,039.	63,181
15	Royalties	0.450.500	4 550 550	100 110	
16	Occupancy	2,160,630.	1,679,560.	428,442.	52,628
17	Travel	103,050.	50,659.	26,775.	25,616
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	COO 054	476 214	00 006	71 014
19	Conferences, conventions, and meetings	629,054.	476,314.	80,826.	71,914
20	Interest				
21	Payments to affiliates	995,130.	336,855.	396,702.	261,573
22	Depreciation, depletion, and amortization	18,942.	9,312.	4,922.	4,708
23 24	Insurance Other expenses, Itemize expenses not covered	10,344.	9,314.	4,344.	4,700
2 4	above. (List miscellaneous expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
9	SCHOOL AND OTHER PROGRA	1,290,269.	1,249,532.	29,281.	11,456
b	SUPPLIES	78,233.	40,760.	16,863.	20,610
c	BANK SERVICE CHARGES	41,144.	41,144.	==,,,,,,,	= - /
d	STAFF RECRUITMENT	39,116.	20,380.	8,431.	10,305
	All other expenses	22,998.	11,981.	4,957.	6,060
25	Total functional expenses. Add lines 1 through 24e	53,825,564.	45,756,510.	4,772,000.	3,297,054
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (202

Form **990** (2021)

		Check if Schedule O contains a response or note to	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3,873,639.	1	2,589,127.
	2	Savings and temporary cash investments			15,119,471.	2	26,222,325.
	3	Pledges and grants receivable, net			11,146,507.	3	10,661,356.
	4	Accounts receivable, net			2,482,303.	4	2,166,865.
	5	Loans and other receivables from any current or fo					
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifie	-				
		under section 4958(f)(1)), and persons described in	n sec	tion 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				276,360.	9	211,158.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	40,496,857.			
	b	Less: accumulated depreciation	10b	14,956,803.	26,395,947.	10c	25,540,054.
	11	Investments - publicly traded securities			77,902,678.	11	67,502,507.
	12	Investments - other securities. See Part IV, line 11			2,622,522.	12	3,437,781.
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			8,166,551.	15	8,560,708.
	16	Total assets. Add lines 1 through 15 (must equal			147,985,978.	16	146,891,881.
	17	Accounts payable and accrued expenses			3,644,531.	17	3,968,998.
	18	Grants payable			104,277.	18	72,307.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			9,825,843.	20	9,102,588.
	21	Escrow or custodial account liability. Complete Pa				21	
ý	22	Loans and other payables to any current or former	offic	er, director,			
Liabilities		trustee, key employee, creator or founder, substar	ntial c	ontributor, or 35%			
abil		controlled entity or family member of any of these	perso	ons		22	
Ë	23	Secured mortgages and notes payable to unrelate	d thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated to	hird p	oarties		24	
	25	Other liabilities (including federal income tax, paya	bles '	to related third			
		parties, and other liabilities not included on lines 1	7-24)	. Complete Part X			
		of Schedule D			43,248,072.	25	53,446,221.
	26	Total liabilities. Add lines 17 through 25			56,822,723.	26	66,590,114.
		Organizations that follow FASB ASC 958, check	here	e ▶ X			
Ses		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			81,898,661.	27	70,890,724.
Bal	28	Net assets with donor restrictions			9,264,594.	28	9,411,043.
пd		Organizations that do not follow FASB ASC 958	ganizations that do not follow FASB ASC 958, check here				
Ē		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds	pital stock or trust principal, or current funds				
set	30	Paid-in or capital surplus, or land, building, or equi				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco	me, d	or other funds		31	
Net	32	Total net assets or fund balances			91,163,255.	32	80,301,767.
	33				147,985,978.	33	146,891,881.

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,11		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,82		
3	Revenue less expenses. Subtract line 2 from line 1	3		,28		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	91	,16	3,2	55.
5	Net unrealized gains (losses) on investments	5	-12	,14	8,8	12.
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 on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	80	,30	1,7	67.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	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?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing					
	Act and OMB Circular A-133?			За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	it			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

UNITED WAY MIAMI INC.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

C/O CARLOS G MOLINA 59-0830840 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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.

		nally integrated supporti	ig organiz	ation.					
f Enter the number of supported	organizations								
g Provide the following information									
(i) Name of supported									
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
Total									

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III

C/O CARLOS G MOLINA Schedule A (Form 990) 2021 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.)

Sec	ction A. Public Support	, prod.		,								
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total					
	Gifts, grants, contributions, and	(=, == ::	(=, == :	(=, == :	(=, ====	(=, ===	(2) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
	membership fees received. (Do not											
	include any "unusual grants.")	59263895.	53897585.	57598444.	110721107	50414009.	331895040					
2	Tax revenues levied for the organ-											
	ization'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	99,586.					5512032.					
4	Total. Add lines 1 through 3	59363481.	<u>55256843.</u>	59204723.	112656092	50925933.	337407072					
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)						005405050					
	Public support. Subtract line 5 from line 4.						337407072					
	ction B. Total Support	1		Τ	1	1						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total					
		59363481.	55 <u>2</u> 568 4 3.	59204/23.	112656092	50925933.	337407072					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,	1630000	1006720	1000616	2112250	2200200	000000					
	and income from similar sources	1638899.	1926738.	1922616.	2112359.	2280380.	9880992.					
9	Net income from unrelated business											
	activities, whether or not the											
40	business is regularly carried on											
10	Other income. Do not include gain											
	or loss from the sale of capital	15,463.	386,361.	279 727	1825071.	277 916	2784538.					
44	assets (Explain in Part VI.)	13,403.	300,301.	213,1216	1023071.	211,510.	350072602					
	Total support. Add lines 7 through 10 Gross receipts from related activities,	eta (aga instructio	, no)			12 2	,890,202.					
	First 5 years. If the Form 990 is for the		,	fourth or fifth tax i			,050,202.					
13	organization, check this box and sto	· ·	, , , ,	•	•	. , , ,	ightharpoonup					
Sec	etion C. Computation of Publi											
	Public support percentage for 2021 (l			column (fl)		14	96.38 %					
	Public support percentage from 2020					15	96.29 %					
	33 1/3% support test - 2021. If the											
	stop here. The organization qualifies						▶ ▼					
b	33 1/3% support test - 2020. If the		-									
_	and stop here. The organization qual											
17a												
	7a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization											
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization											
b	10% -facts-and-circumstances test	-	-	*	-							
	more, and if the organization meets the	ū				•						
	organization meets the facts-and-circ					*:	>					
18	Private foundation. If the organization		-	• •			. —					
				•	-							

Schedule A (Form 990) 2021

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	Т	Т	T	1
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)					-	
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	1	<u> </u>
14	First 5 years. If the Form 990 is for the	-			•		
Sa	check this box and stop here ction C. Computation of Publi						P
	Public support percentage for 2021 (li			poluma (fl)		15	0/
	Public support percentage from 2020		•	.,,		16	% %
	ction D. Computation of Inves					1 10	70
	Investment income percentage for 20			ne 13. column (fl)		17	%
	Investment income percentage from 2					18	
	a 33 1/3% support tests - 2021. If the						
	more than 33 1/3%, check this box ar						. —
ŀ	33 1/3% support tests - 2020. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No 1 2 За 3b Зс 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9с 10a 10b

132024 01-04-21

rai	Supporting Organizations (continued)				
		_		Yes	No
11	1 Has the organization accepted a gift or contribution from a	ny of the following persons?			
а	a A person who directly or indirectly controls, either alone or	together with persons described on lines 11b and			
	11c below, the governing body of a supported organization]?	11a		
b	b A family member of a person described on line 11a above?		11b		
С	c A 35% controlled entity of a person described on line 11a of	or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	·	11c		
Sect	ection B. Type I Supporting Organizations				
				Yes	No
1	1 Did the governing body, members of the governing body, o	officers acting in their official capacity, or membership of one or			
		appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No				
		ion's activities. If the organization had more than one supported			
	supported organizations and what conditions or restrictions	move officers, directors, or trustees were allocated among the	1		
	organization(s) that operated, supervised, or controlled the				
	Part VI how providing such benefit carried out the purpose.	, ,			
	supervised, or controlled the supporting organization.	of the supported organization(s) that operated,	2		
Sect	ection C. Type II Supporting Organizations	-			
				Yes	No
1	1 Were a majority of the organization's directors or trustees of	during the tax year also a majority of the directors			110
	or trustees of each of the organization's supported organiz	* * *			
	or management of the supporting organization was vested i				
		Ti the same persons that controlled of managed	1		
Sect	the supported organization(s). Section D. All Type III Supporting Organizations	L	•		
	,, ,,			Yes	No
1	1 Did the organization provide to each of its supported organ	pizations, by the last day of the fifth month of the			110
	organization's tax year, (i) a written notice describing the ty				
	year, (ii) a copy of the Form 990 that was most recently file	-			
	organization's governing documents in effect on the date of		1		
			•		
	organization(s) or (ii) serving on the governing body of a su	·			
		, · ·	2		
	the organization maintained a close and continuous working By reason of the relationship described on line 2, above, di				
	significant voice in the organization's investment policies a				
	income or assets at all times during the tax year? If "Yes,"	-			
		describe in Fait VI the role the organization's	3		
Sect	supported organizations played in this regard. Section E. Type III Functionally Integrated Suppo	rting Organizations	<u> </u>		
1					
' a		d to satisfy the Integral Part Test during the year (see instructions).			
b					
C		Describe in Part VI how you supported a governmental entity (see instr		-1	
2		rescribe in Fact vi now you supported a governmental entity (see instri	uction	Yes	No
		on tay year directly further the exempt purposes of		163	140
	the supported organization(s) to which the organization wa				
		,			
	those supported organizations and explain how these are				
	how the organization was responsive to those supported or	-	2a		
h	that these activities constituted substantially all of its activities b Did the activities described on line 2a, above, constitute ac		Za		
b					
	one or more of the organization's supported organization(s	, ,			
	Part VI the reasons for the organization's position that its su	apported organization(s) would have engaged in	2b		
2	these activities but for the organization's involvement. 2 Parent of Supported Organizations. Answer lines 3a and the second of the second organization of Supported Organizations.	3h helow	ZU		
			20		
	trustees of each of the supported organizations? If "Yes" or a substantial degree of direct	·	3a		
b			2h		
	of its supported organizations? If "Yes." describe in Part V	I the role played by the organization in this regard.	3b		

132025 01-04-22 Schedule A (Form 990) 2021

га	Type in Non-Functionally integrated 309(a)(3) Support	ng Organi	24110115	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion 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		
Sect	ion 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		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-function		d Type III supporting orga	unization (soc

Schedule A (Form 990) 2021

instructions).

C/O CARLOS G MOLINA

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continued)	<u> </u>
<u>Secti</u>	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpose	3	1	
4	Amounts paid to acquire exempt-use assets	4		
5	Qualified set-aside amounts (prior IRS approval required - pro	5	i	
6	Other distributions (describe in Part VI). See instructions.	6	i	
_7	Total annual distributions. Add lines 1 through 6.			,
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9_	Distributable amount for 2021 from Section C, line 6		9)
10	Line 8 amount divided by line 9 amount	T		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
<u>b</u>	From 2017			
c	From 2018			
d	From 2019			
e	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2021 distributable amount			
<u>_i</u>	Carryover from 2016 not applied (see instructions)			
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Part VI	Part IV, Sed line 1; Part	ction A, lines 1 IV, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4c, 5a lines 2 and 3; Part I\	he explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, /, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, on E, lines 2, 5, and 6. Also complete this part for any additional information.
PART I	I LINE	10		
FISCAL	AGENT	FEES -		\$222,345
OTHER :	MISCEL	LANEOUS	REVENUE -	\$55,571

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

➤ Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

UNITED WAY MIAMI INC.

C/O CARLOS G MOLINA

Employer identification number

59-0830840

Filers of:		Section:
Form 990	or 990-EZ	\boxed{X} 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
		covered by the General Rule or a Special Rule. (), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General l	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special F	Rules	
:	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one 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; line 1. Complete Parts I and II.
	contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
answer "I	No" on Part IV, line	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization
UNITED WAY MIAMI INC.
C/O CARLOS G MOLINA

Employer identification number

59-0830840

Parti	Contributors (see instructions). Use duplicate copies of Part I if additional	i space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>•</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>•</u>	Person X Payroll

Schedule B (Form 990) (2021) Page 2

Name of organization
UNITED WAY MIAMI INC.
C/O CARLOS G MOLINA

Employer identification number 59-0830840

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) Total contributions No. Name, address, and ZIP + 4 Type of contribution 7 X Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Name of organization
UNITED WAY MIAMI INC.
C/O CARLOS G MOLINA

Employer identification number

59-0830840

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	Iditional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
1		- - - - \$	06/30/22			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - _ \$	Cabadada D (Faura 200) (2004)			

Name of organization **Employer identification number** UNITED WAY MIAMI INC. C/O CARLOS G MOLINA 59-0830840 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete 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. **Employer identification number** UNITED WAY MIAMI INC. C/O CARLOS G MOLINA 59-0830840 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures

Description

**Descriptio Volunteer hours for political campaign activities 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? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 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 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b _______ ▶\$ _ Did the filing organization file Form 1120-POL for this year? 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. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

	dule C (Form 990) 2021	C/O C	ARLOS	G MOLINA		59-0	830840 Page 2
Par	t II-A Complete if the org	janizatio	n is exen	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
	section 501(h)).						
A Cł				liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
- 0	expenses, and sha		, ,	• •			
B Cr	neck Lifthe filing organiza	ation check	ed box A ar	nd "limited control" pro	visions apply.	() =:::	6 3 A 6511
			bying Exper leans amou	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
10	Total lobbying expenditures to influ	uonco pub	lic opinion (araceroote lobbying)		99,113.	
	Total lobbying expenditures to influence to	•				24,778.	
	Total lobbying expenditures (add li		•			123,891.	
	Other exempt purpose expenditure					54,208,528.	
	Total exempt purpose expenditure					54,332,419.	
	Lobbying nontaxable amount. Enter					1,000,000.	
,	If the amount on line 1e, column (a) of			bying nontaxable am		, ,	
- 1	Not over \$500,000			the amount on line 1e.			
l	Over \$500,000 but not over \$1,000	0,000		00 plus 15% of the exce	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exce	ess over \$1,000,000.		
[Over \$1,500,000 but not over \$17	,000,000		00 plus 5% of the exces			
	Over \$17,000,000		\$1,000,	000.			
g	Grassroots nontaxable amount (er	nter 25% of	line 1f)			250,000.	
h	Subtract line 1g from line 1a. If zer	o or less, e	enter -0			0.	
	Subtract line 1f from line 1c. If zero					0.	
j	If there is an amount other than ze	ro on eithe	er line 1h or l	line 1i, did the organiza	tion file Form 4720	-	
	reporting section 4911 tax for this	year?					Yes No
	(0			eraging Period Under	` '	Cab - Coo boom - b -	Laure
	(Some organizations t			on(n) election do not i ate instructions for lir	•	of the five columns be	elow.
			-	nditures During 4-Yea			
			bying Exper		Averaging Feriou		
	Calendar year (or fiscal year beginning in)	(a)	2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
_2a	Lobbying nontaxable amount	1,00	0,000.	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	13	7,794.	116,688.	104,631.	123,891.	483,004.
d	Grassroots nontaxable amount	25	0,000.	250,000.	250,000.	250,000.	1,000,000.

Schedule C (Form 990) 2021

99,113.

1,500,000.

386,403.

93,350.

110,235.

83,705.

e Grassroots ceiling amount

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

f Grassroots lobbying expenditures

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.					(b)	
	obbying activity.	Yes)	Amoun	
1 [During the year, did the filing organization attempt to influence foreign, national, state, or					
lo	ocal legislation, including any attempt to influence public opinion on a legislative matter					
C	or referendum, through the use of:					
a V	/olunteers?					
b F	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
-	Other activities?					
	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	f "Yes," enter the amount of any tax incurred under section 4912					
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	 า 501 <i>(</i> c) <i>(</i> 5). or	sec	tion	
	501(c)(6).	(.)(.	,,			
						N
					Yes	1.4
V	Vere substantially all (90% or more) dues received nondeductible by members?		Г	1	Yes	14
	Vere substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2	Yes	14
2 C	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5	o), or	2 3 sec	tion	
2 [3 [art	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	e prior year? n 501(c)(5	5), or (b) Pa	2 3 sec art I	tion	
e c art	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5 'No" OR (5), or (b) Pa	2 3 sec	tion	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5 'No" OR (5), or (b) Pa	2 3 sec art I	tion	
art	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? 1 501(c)(5 No" OR (i), or (b) Pa	2 3 sec art I	tion	
art	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	e prior year? 1 501(c)(5 No" OR (5), or (b) Pa	2 3 sec art I	tion	
art l	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5 lNo" OR (5), or (b) Pa	2 3 sec art I	tion	
art art b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members dection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Carryover from last year	e prior year? n 501(c)(5 lNo" OR (5), or (b) Pa	2 3 sec art I	tion	
e a C b C c T B A	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? 1 501(c)(5 No" OR (5), or (b) Pa	2 3 sec art I	tion	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Dection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5 No" OR (5), or (b) Pa	2 3 sec art I	tion	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Durrent year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? 1 501(c)(5 No" OR (5), or (b) Pa	2 3 sec art I	tion	

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.

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

OMB No. 1545-0047 Inspection

Name of the organization

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA

Employer identification number 59-0830840

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Similar Funds or F	ACCOUNTS. Complete if the
		(a) Donor advis	ed funds	(b) Funds and other accounts
1	Total number at end of year		18	
2	Aggregate value of contributions to (during year)	9 ,	830,207.	
3	Aggregate value of grants from (during year)	8 , 22 ,	529,427.	
4	Aggregate value at end of year	22	450,582.	
5	Did the organization inform all donors and donor advisors in wr			nds
	are the organization's property, subject to the organization's ex	-		
6	Did the organization inform all grantees, donors, and donor adv			
_	for charitable purposes and not for the benefit of the donor or o			
	impermissible private benefit?	•		
Pai	t II Conservation Easements. Complete if the orga			
1	Purpose(s) of conservation easements held by the organization			,
-	Preservation of land for public use (for example, recreation		_	storically important land area
	Protection of natural habitat		_	rtified historic structure
	Preservation of open space			Timed motorie etraetare
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contril	oution in the form of a c	conservation easement on the last
_	day of the tax year.	a concentation contin		Held at the End of the Tax Year
а				2a
b				
c	Number of conservation easements on a certified historic struc			
	Number of conservation easements included in (c) acquired aft			. 20
ŭ	listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, relea			<u> </u>
Ū	year	acca, extinguionea, or	terrimated by the orga	inization daming the tax
4	Number of states where property subject to conservation ease	ment is located		
5	Does the organization have a written policy regarding the perio	_	ction handling of	
Ū	violations, and enforcement of the conservation easements it h	- · · · ·		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha			
·		arraning or trolations, s	and officially control rule	non cacomonic adming the year
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and e	nforcing conservation e	easements during the year
-	▶ \$	ng or morationic, and o	e.eg concertation c	accome daming the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requiremen	nts of section 170(h)(4)(l	B)(i)
_	and section 170(h)(4)(B)(ii)?		. , , , ,	
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footno		·	
	organization's accounting for conservation easements.	g		
Pai	t III Organizations Maintaining Collections of A	Art, Historical Tre	easures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its re	venue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for public	•		
	service, provide in Part XIII the text of the footnote to its finance			1
b	If the organization elected, as permitted under FASB ASC 958,			ce sheet works of
	art, historical treasures, or other similar assets held for public e			
	provide the following amounts relating to these items:	,		1
	(i) Revenue included on Form 990, Part VIII, line 1			• \$
2	If the organization received or held works of art, historical treas			
_	the following amounts required to be reported under FASB ASI			×1
а	Revenue included on Form 990, Part VIII, line 1	~		> \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions f			Schedule D (Form 990) 2021

132051 10-28-21

C/O CARLOS G MOLINA

Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or	Other S	Similar Ass	ets (cont	inued)	uge –	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the f	ollowing that r	nake sigr	nificant use of i	ts			
	collection items (check all that apply): Dublic exhibition d Loan or exchange program									
а	Public exhibition	d	Loan or excl	hange progran	n					
b										
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization	's exemp	t purpose in P	art XIII.			
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other	similar as	ssets			_	
_	to be sold to raise funds rather than to be ma						Yes		No	
Pai	t IV Escrow and Custodial Arranger reported an amount on Form 990, Particle 10 (1997).		ete if the organization	n answered "Y	es" on F	orm 990, Part l	V, line 9, o	r		
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contributions	s or other asse	ts not inc	cluded				
	on Form 990, Part X?						Yes		No	
b	If "Yes," explain the arrangement in Part XIII									
							Amou	nt		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ıstodial accour	nt liability	?	Yes	L	_ No	
	If "Yes," explain the arrangement in Part XIII.									
Pai	t V Endowment Funds. Complete									
		(a) Current year	(b) Prior year	(c) Two years		I) Three years ba	_			
1a	Beginning of year balance	35,750,544.	25,927,458.			23,928,03			<u>,371.</u>	
b	Contributions	914,089.	3,198,465.	· · · ·		1,182,43	_		<u>,566.</u>	
С	Net investment earnings, gains, and losses	-4,539,756.	8,079,625.		992.	1,383,75			,814.	
d	Grants or scholarships	348,339.	348,339.	288,	738.	302,24	1.	286	,532.	
е	Other expenditures for facilities									
	and programs	1,110,162.	1,106,665.		,606.	181,09			<u>,196.</u>	
f	Administrative expenses				580.	1,141,93	_		<u>,993.</u>	
g	End of year balance	30,666,376.	35,750,544.	25,927,	458.	24,868,94	1. 23	,928	,030.	
2	Provide the estimated percentage of the curr		e (line 1g, column (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment ► 27.4500	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3а	Are there endowment funds not in the posse	ssion of the organiza	tion that are held an	nd administere	d for the	organization			T	
	by:							Yes		
	(i) Unrelated organizations								X	
	(ii) Related organizations						3a(ii)		X	
b	If "Yes" on line 3a(ii), are the related organization						3b			
4 Pai	t VI Land, Buildings, and Equipm		wment funds.							
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, I	Part X, lin	ne 10.				
	Description of property	(a) Cost or o		or other (other)		cumulated eciation	(d) Boo	ok valu	ıe	
	Land	,		9,337.			7,01	9.3	37.	
	Buildings				12.3	70,705.	17,62			
C	Leasehold improvements			5,032.		95,116.			16.	
d	Equipment			0,635.		28,264.			71.	
	Other			5,252.		52,718.			34.	
	. Add lines 1a through 1e. (Column (d) must e				-		25,54			
	J (Ooidiiii (d) Musi C	and i cilli coo, i dit	· · · · · · · · · · · · · · · · · · ·				ule D (For			

Part VII Investments - Other Securities.	on Farma 000, Bart IV, line	addle Coo Forms 2000 Dord V line 40	Tage 9
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of year market value
, , , , , , , , , , , , , , , , , , , ,	(b) book value	(c) Method of Valuation. Cost of end	-or-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" o			
(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.)			
	n Form 000 Dort IV line	alld Con Form 000 Port V line 15	
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
TAMED DOM: TALL TAXABLE DADWIND OUT D			8,509,679.
			51,029.
			31,029.
(3)			
(4)			
(5)			
(6) (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)	•	8,560,708.
Part X Other Liabilities.	10.)		0,000,000
Complete if the organization answered "Yes" o	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability		, ,	(b) Book value
(1) Federal income taxes			
(2) APPROVED ALLOCATIONS PAYABLE			8,219,569.
(3) DONOR DESIGNATED ALLOCATIO			, -, -, -
(4) PAYABLE			36,716,973.
(5) SPECIAL CONTRIBUTIONS ALLOCATIONS			•
(6) PAYABLE			8,509,679.
(7)			•
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line	25.)	>	53,446,221.
2. Liability for uncertain tax positions. In Part XIII, provide t	,		

Schedule D (Form 990) 2021

UNITED WAY MIAMI INC. Schedule D (Form 990) 2021 C/O CARLOS G MOLINA 59	-0830840 Page n.
Schedule D (Form 990) 2021 C/O CARLOS G MOLINA 59	t t t t = t t ugo
	n.
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	25,801,078
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments 2a -12,148,812.	
b Donated services and use of facilities 2b 511,924.	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	37,437,966
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	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn.

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements					1	36,662,566.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a		511	,924.		
b	Prior year adjustments	2b					
	Other losses	2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d					2e	511,924.
3	Subtract line 2e from line 1					3	36,150,642.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b	17	,674	,922.		
С	Add lines 4a and 4b					4c	17,674,922.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5	53,825,564.
Pai	t 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 X, LINE 2:

GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF UNITED WAY HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN AND HAS CONCLUDED THAT AS OF JUNE 30, 2022, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. IF UNITED WAY WERE TO INCUR AN INCOME TAX LIABILITY IN THE FUTURE, INTEREST ON ANY INCOME TAX LIABILITY WOULD BE REPORTED AS INTEREST EXPENSE, AND PENALTIES ON ANY INCOME TAX LIABILITY WOULD BE REPORTED AS INCOME TAXES. UNITED WAY IS SUBJECT TO ROUTINE AUDITS BY

Part XIII Supplemental Information (continued)
TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX
PERIODS IN PROGRESS.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
DONOR DESIGNATED FUNDS & DONOR RESTRICTED INVESTMENTS 17,674,922.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
DONOR DESIGNATED FUNDS & DONOR RESTRICTED INVESTMENTS 17,674,922.
PART V, LINE 4 - ENDOWNMENT FUNDS
INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS ARE BOARD DESIGNATED
ENDOWMENT - TO PROVIDE OPERATING RESOURCES FOR THE FUTURE PERMANENTLY
RESTRICTED ENDOWMENT - THE INTEREST GENERATED FROM THE CORPUS OF THIS
ENDOWMENT WILL BE USED TO SUPPORT THE OPERATIONS OF THE CENTER FOR
EXCELLENCE IN EARLY EDUCATION.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization UNITED WAY MIAMI INC.

Employer identification number

	LOS G MOLINA				59-0830	840
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
 Indicate whether the organization rais a Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the 	e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover lising of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organizatio	n is registered or licensed to solicit o	ontrib	▶ utions	or has been notified	it is exempt from re	gistration
or licensing.						

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

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

		of fundraising event contributions and gro	ss income on Form 990-		vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				MAYOR'S		(add col. (a) through
			VERITAGE	BALL	5	col. (c)
4			(event type)	(event type)	(total number)	COI. (C))
Revenue						
eve	1	Gross receipts	834,591.	1,417,239.	493,052.	2,744,882.
Œ						
	2	Less: Contributions	494,599.	1,082,440.	1,257.	1,578,296.
	3	Gross income (line 1 minus line 2)	339,992.	334,799.	491,795.	1,166,586.
	4	Cash prizes				
	5	Noncash prizes				
ses						
Sens	6	Rent/facility costs	5,370.	47,565.	4,700.	57,635.
Direct Expenses						
ect	7	Food and beverages	74,881.	74,493.	414.	149,788.
Ë			685	45 000		10 555
	8	Entertainment	675.	17,900.	150 050	18,575.
	9	Other direct expenses	358,672.	314,576.	150,972.	824,220.
	10	- · · · · · · · · · · · · · · · · · · ·			.	1,050,218.
Pa	11 rt I	Net income summary. Subtract line 10 from line III Gaming. Complete if the organization a		000 Dest IV line 10 and		116,368.
Г	1 L I	\$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 0111 01111 990-EZ, III1e 0a.		(b) Pull tabs/instant		(d) Total gaming (add
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue				g., p g		(2)
æ	4	Gross revenue				
		aross revenue				
	2	Cash prizes				
ses						
ben	3	Noncash prizes				
Direct Expenses						
Sec	4	Rent/facility costs				
⊡						
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	☐ No	☐ No	☐ 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))	
	_					
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming ac				Yes No
b	It "	No," explain:				
	_					
10-	\^/-	ore any of the organization's semina lies	volcod guopandad anti-	rminated during the tarre	voor?	Yes No
		ere any of the organization's gaming licenses re		-	Gai !	res NO
Ŋ	"	Yes," explain:				
	_					_
	_					

132082 10-21-21 Schedule G (Form 990) 2021

UNITED WAY MIAMI INC.

Scn	edule G (Form 990) 2021 C/O CARLOS G MOLINA 59	-0030	040	Page 3
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?	\square	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	. 13a		%
	An outside facility			%
	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	olf "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:			
	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 > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, lir	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
	· · · · · · · · · · · · · · · · · · ·			

UNITED WAY MIAMI INC.

Schedule G	G (Form 990) C /	O CARLOS G	MOLINA	59-0830840	Page 4
Part IV	Supplemental Informat	ion (continued)			
		(continued)			

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization UNITED WA C/O CARLO							Employer identification number $59-0830840$
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's propert II Grants and Other Assistance to I	stance? ocedures for monit	oring the use of grant	funds in the United	States.			Yes X No
recipient that received more than \$					anization answered	res offrom 990, rait	TV, III e 21, 101 arry
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
9 DOTS COMMUNITY LEARNING CENTER 931 N HIGHLAND AVE LOS ANGELES, CA 90038	45-2834070	501 C (3)	10,000.	0.			GENERAL FUNDS
ABANDONED PET RESCUE, INC. 1137 NE 9TH AVENUE FORT LAUDERDALE, FL 33304	65-0655473		8,663.	0.			GENERAL FUNDS
ACHIEVE MIAMI, INC 1951 NW 7TH AVENUE MIAMI, FL 33136	47-5482321	501 C (3)	11,385.	0.			GENERAL FUNDS
ADOM HEALTH FOUNDATION, INC. 730 NW 34TH STREET MIAMI, FL 33127	59-1709438	501 C (3)	25,083.	0.			GENERAL FUNDS
ADRIENNE ARSHT CENTER FOUNDATION, INC 1300 BISCAYNE BLVD. 3RD FLOOR - MIAMI, FL 33132	26-2567808	501 C (3)	22,100.	0.			GENERAL FUNDS
ALPHA EPSILON PI FOUNDATION, INC. 8815 WESLEYAN RD INDIANAPOLIS, IN 46268	13-6141078	501 C (3)	201,000.	0.			GENERAL FUNDS
2 Enter total number of section 501(c)(3) at	nd government orç	ganizations listed in th	e line 1 table				528.

 $\label{eq:LHA} \mbox{ \ \ } \mbox{For Paperwork Reduction Act Notice, see the Instructions for Form 990.}$

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	Γ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALPINE LEARNING GROUP FOUNDATION, INC 777 PARAMUS RD - PARAMUS, NJ 07652	22-2887044	501 C (3)	25,000.	0.			GENERAL FUNDS
ALSAC-ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 5201 BLUE LAGOON SUITE 650 - MIAMI, FL 33126	35-1044585	501 C (3)	9,461.	0.			GENERAL FUNDS
ALZHEIMER'S ASSOCIATION NATIONAL OFFICE - 225 N MICHIGAN AVE. 17TH FL CHICAGO, IL 60601	13-3039601		18,000.	0.			GENERAL FUNDS
AMANDA ROSE LAURA FOUNDATION 27 BALDWIN DR BWEKELEY HEIGHTS, NJ 07922	82-2584890	501 C (3)	6,280.	0.			GENERAL FUNDS
AMERICA BAR ASSOCIATION FUND 321 N CLARK ST. CHICAGO, IL 60654	36-6110299	501 C (3)	16,000.	0.			GENERAL FUNDS
AMERICAN CANCER SOCIETY, INC 2310 ROUTE 34, STE D MANASQUAN, NJ 08736	13-1788491	501 C (3)	10,300.	0.			GENERAL FUNDS
AMERICAN CANCER SOCIETY, MANHATTAN 132 W 32 ST. NEW YORK, NY 10001	13-1788491	501 C (3)	23,180.	0.			GENERAL FUNDS
AMERICAN FRIENDS OF RABIN MEDICAL CENTER - 636 BROADWAY SUITE 218 - NEW YORK, NY 10012	52-1903777	501 C (3)	22,550.	0.			GENERAL FUNDS
AMERICAN FRIENDS OF THE TEL AVIV UNIVERSITY - 39 BROADWAY SUITE 1510 - NEW YORK, NY 10006	13-1996126	501 C (3)	25,000.	0.			GENERAL FUNDS

	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990). Par	付Ⅱ \	
(IN) FINI				I	T,	T
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
13-5613797	501 C (3)	27,478.	0.			GENERAL FUNDS
13-5613797	501 C (3)	22,800.	0.			GENERAL FUNDS
		,				
13-5563393	501 C (3)	51,006.	0.			GENERAL FUNDS
13_5563303	501 C (3)	10.000	0			GENERAL FUNDS
13-3303333	501 C (3)	10,000.	0.			GENERAL FUNDS
59-0651070	501 C (3)	311,592.	0.			GENERAL FUNDS
13-1623829	501 C (3)	8 210	0			GENERAL FUNDS
10 1020025	501 6 (5)	0,210.				CENTERIE I SADO
65-0610872	501 C (3)	18,710.	0.			GENERAL FUNDS
		45,600.	0.			GENERAL FUNDS
50_1561540	501 C (3)	110 720				GENERAL FUNDS
	13-5613797 13-5613797 13-5613797 13-5563393 13-5563393 59-0651070 13-1623829 65-0610872		13-5613797 501 C (3) 27,478. 13-5613797 501 C (3) 22,800. 13-5563393 501 C (3) 51,006. 13-5563393 501 C (3) 10,000. 59-0651070 501 C (3) 311,592. 13-1623829 501 C (3) 8,210. 65-0610872 501 C (3) 18,710.	13-5613797 501 c (3) 27,478. 0. 13-5613797 501 c (3) 22,800. 0. 13-5563393 501 c (3) 51,006. 0. 13-5563393 501 c (3) 10,000. 0. 59-0651070 501 c (3) 311,592. 0. 13-1623829 501 c (3) 8,210. 0. 65-0610872 501 c (3) 18,710. 0.	if applicable cash grant noncash assistance (book, FMV, appraisal, other) 13-5613797 501 c (3) 27,478. 0. 13-5613797 501 c (3) 22,800. 0. 13-5563393 501 c (3) 51,006. 0. 13-5563393 501 c (3) 10,000. 0. 59-0651070 501 c (3) 311,592. 0. 13-1623829 501 c (3) 8,210. 0. 65-0610872 501 c (3) 18,710. 0. 13-2569185 501 c (3) 45,600. 0.	if applicable cash grant noncash assistance valuation (book, FMV, appraisal, other) non-cash assistance 13-5613797 501 c (3) 27,478. 0. 13-5613797 501 c (3) 22,800. 0. 13-5563393 501 c (3) 51,006. 0. 13-5563393 501 c (3) 10,000. 0. 59-0651070 501 c (3) 311,592. 0. 13-1623829 501 c (3) 8,210. 0. 65-0610872 501 c (3) 18,710. 0. 13-2569185 501 c (3) 45,600. 0.

Schedule I (Form 990) C/O CARLO							9-08308 4 0 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pai T	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTI-DEFAMATION LEAGUE, NEW YORK	12 1010702	504 6 (2)	04.050				
NEW YORK, NY 10158-3560	13-1818723	501 C (3)	24,250.	0.			GENERAL FUNDS
ARCHBISHOP'S CHARITIES DRIVE-ABCD 9401 BISCAYNE BLVD.							
MIAMI SHORES, FL 33138	59-0865839	501 C (3)	22,420.	0.			GENERAL FUNDS
ASSOCIATION OF GRADUATES OF THE UNITED STATES MILITARY ACAD 698	14 1050553	504 G (2)	100.000				
MILLS RD - WEST POINT, NY 10996	14-1260763	501 C (3)	100,000.	0.			GENERAL FUNDS
ASSOCIATION OF THE BAR OF THE CITY 42 W 44TH ST							
NEW YORK, NY 10036	13-6003018	501 C (3)	15,000.	0.			GENERAL FUNDS
ATLANTA HISTORICAL SOCIETY 130 WEST PACES FERRY RD NW ATLANTA, GA 30305	58-0566162	501 C (3)	23,500.	0.			GENERAL FUNDS
ATLANTA JEWISH FILM SOCIETY, INC. 1800 PEACHTREE ST NW SUITE 830							
ATLANTA, GA 30309	47-1260411	501 C (3)	23,862.	0.			GENERAL FUNDS
ATLANTA-FULTON COUNTY ZOO, INC. 800 CHEROKEE AVE SE							
ATLANTA, GA 30315	58-1655184	501 C (3)	6,950.	0.			GENERAL FUNDS
AUDRAIN AUTOMOBILE MUSEUM, INC. 222 BELLEVUE AVE							
NEWPORT, RI 02840	47-1918005	501 C (3)	29,500.	0.			GENERAL FUNDS
AYITI COMMUNITY TRUST, INC 685 NE 126TH ST							
NORTH MIAMI, FL 33161	81-4814751	501 C (3)	40,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	Γ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AYITI DEMEN 28 BETHUNE ST.							
NEW YORK, NY 10014	20-8967664	501 C (3)	64,066.	0.			GENERAL FUNDS
NEW TORK, NT 10014	20 0307004	501 C (3)	04,000.	· ·			GENERAL FONDS
BALLET HISPANO OF NEW YORK							
167 WEST 89TH STREET							
NEW YORK, NY 10024	13-2685755	501 C (3)	10,000.	0.			GENERAL FUNDS
BAPTIST HEALTH SOUTH FLORIDA							
FOUNDATION - 1575 SAN IGNACIO AVE							
FL 4, SUITE 406 - CORAL GABLES, FL							
33143	59-1923401	501 C (3)	261,754.	0.			GENERAL FUNDS
BAPTIST HEALTH SOUTH FLORIDA							
SUNSHINE FUND - 6855 RED ROAD -							
CORAL GABLES, FL 33143	65-0267668	501 C (3)	21,234.	0.			GENERAL FUNDS
DELA FONDE DA GOL GV. GENERE TAG							
BELAFONTE TACOLCY CENTER, INC. 6161 NW 9TH AVE.							
MIAMI, FL 33127-1013	59-1376077	501 C (3)	46,562.	0.			GENERAL FUNDS
HIIMI, 11 3312, 1013	33 1370077	301 C (3)	10,302.	0.			CHADAIL TONDS
BELEN JESUIT PREPARATORY SCHOOL,							
INC 500 S.W. 127TH AVENUE -							
MIAMI, FL 33184	59-1923401	501 C (3)	45,404.	0.			GENERAL FUNDS
•			, , , , , , , , , , , , , , , , , , ,				
BEST BUDDIES INTERNATIONAL, INC.							
100 S.E. 2ND STREET SUITE 2200							
MIAMI, FL 33131	52-1614576	501 C (3)	12,955.	0.			GENERAL FUNDS
BETH TORAH ADATH YESHURUN, INC.							
20350 NE 26TH AVENUE							
NORTH MIAMI BEACH, FL 33180	59-2750308	501 C (3)	6,800.	0.			GENERAL FUNDS
DIG DROWNING DIG CICARDS OF							
BIG BROTHERS BIG SISTERS OF							
GREATER MIAMI - 550 NW 42ND AVE -	59-6166904	501 C (3)	312 279	0.			GENERAL FUNDS
MIAMI, FL 33126	33-0100904	DOT C (3)	312,278.	U.			AEMEKAT LONDS

Schedule I (Form 990) C/O CARLOS Part II Continuation of Grants and Other A			and Damastia Ca	versente (Sch	adula I (Form 000) Bar		9-0830840 Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF METRO ATLANTA, INC 1382 PEACHTREE ST, NE - ATLANTA, GA 30309	58-0861895	501 C (3)	38,600.	0.			GENERAL FUNDS
BIRTHRIGHT ISRAEL FOUNDATION 33 E 33RD ST FL 7 NEW YORK, NY 10016	13-4092050	501 C (3)	35,250.	0.			GENERAL FUNDS
BOCA RATON ROTARY FUND, INC. 6200 BOCA DEL MAR DR BOCA RATON, FL 33433	59-6151047	501 C (3)	25,000.	0.			GENERAL FUNDS
BOCA WEST COMMUNITY CHARITABLE FOUNDATION, INC 20583 BOCA WEST DR - BOCA RATON, FL 33434	27-3840788		112,463.	0.			GENERAL FUNDS
BOSTON BAR FOUNDATION 16 BEACON STREET BOSTON, MA 02108	04-6111344	501 C (3)	5,818.	0.			GENERAL FUNDS
BOY SCOUTS OF AMERICA CIRCLE TEN COUNCIL - 8605 HARRY HINES - DALLAS, TX 75235	75-0800615	501 C (3)	10,000.	0.			GENERAL FUNDS
BOY SCOUTS OF AMERICA, SOUTH FLORIDA COUNCIL, INC 15255 NORTHWEST 82ND AVENUE - MIAMI LAKES, FL 33147	59-0637817		15,396.	0.			GENERAL FUNDS
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE ST., NE ATLANTA, GA 30309	13-1573954	501 C (3)	15,000.	0.			GENERAL FUNDS
BOYS & GIRLS CLUBS OF METRO ATLANTA - 1275 PEACHTREE ST NE SUITE 500 - ATLANTA, GA 30309	58-0566123	501 C (3)	26,470.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF METRO							
DENVER, INC 2017 W 9TH AVENUE							
- DENVER, CO 80204	84-0510404	501 C (3)	7,500.	0.			GENERAL FUNDS
BOYS & GIRLS CLUBS OF MIAMI-DADE,							
INC P.O. BOX 330219 - MIAMI,							
FL 33233-0219	59-0879227	501 C (3)	204,527.	0.			GENERAL FUNDS
BRANCHES, INC.							
11500 NW 12TH AVE							
MIAMI, FL 33168-6217	65-0716969	501 C (3)	610,971.	0.			GENERAL FUNDS
	00 0,2000	001 0 (0)	010,5111				
BREAKTHROUGH MIAMI, INC.							
3250 SW THIRD AVE UNIT 6							
MIAMI, FL 33129	26-2105534	501 C (3)	7,207.	0.			GENERAL FUNDS
BRIGHTON CENTER							
14207 HIGGINS RD				_			
SAN ANTONIO, TX 78217	74-2331826	501 C (3)	8,500.	0.			GENERAL FUNDS
BROOKLYN BUREAU OF COMMUNITY							
SERVICE - 285 SCHERMERHOM ST -							
BROOKLYN, NY 11217	11-1630780	501 C (3)	8,000.	0.			GENERAL FUNDS
			1,000				
BROWARD COLLEGE FOUNDATION INC							
111 E LAS OLAS BLVD. SUITE 11							
FORT LAUDERDALE, FL 33301	23-7181959	501 C (3)	15,000.	0.			GENERAL FUNDS
CALHOUN SCHOOL, INC.							
433 W END AVE							
NEW YORK, NY 10024	13-1623919	501 C (3)	14,250.	0.			GENERAL FUNDS
			11,250.	٠.			
CAMILLUS HOUSE, INC.							
1603 NW 7TH AVE							
MIAMI, FL 33136	65-0032862	501 C (3)	21,689.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPOUT FOR KIDS 1643 N MILWAUKEE AVE FL 5 CHICAGO, IL 60647	26-3646306	501 C (3)	9,000.	0.			GENERAL FUNDS
CARE ELEMENTARY SCHOOL, INC. 2025 NW 1ST ST MIAMI, FL 33127	46-5269625	501 C (3)	16,000.	0.			GENERAL FUNDS
CARE RESOURCE 3510 BISCAYNE BLVD SUITE 300 MIAMI, FL 33137	59-2564198		100,133.	0.			GENERAL FUNDS
CARNEGIE COUNCIL FOR ETHICS IN INTERNATIONAL AFFAIRS, INC 170 E 64TH ST - NEW YORK, NY 10065	13-1573954	501 C (3)	50,000.	0.			GENERAL FUNDS
CARNEGIE HALL CORPORATION 881 SEVENTH AVE NEW YORK, NY 10019	13-1923626	501 C (3)	48,600.	0.			GENERAL FUNDS
CARROLLTON SCHOOL OF THE SACRED HEART - 3747 MAIN HIGHWAY - MIAMI, FL 33133	59-6082015	501 C (3)	150,696.	0.			GENERAL FUNDS
CASA DE AMMA, INC. 27231 CALLE ARROYO SAN JUAN CAPISTRANO, CA 92675	26-0030511	501 C (3)	7,500.	0.			GENERAL FUNDS
CASA FAMILIA, INC. 1550 S DOUGLAS RD STE 280 CORAL GABLES, FL 33134	47-4734481	501 C (3)	18,240.	0.			GENERAL FUNDS
CATALYST MIAMI, INC. 260 NE 17 TERRACE STE 200 MIAMI, FL 33132	65-0690368	501 C (3)	100,145.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO				. (0.1	111/5 222) 5		9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doı	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CC BEHAVIORAL HEALTH SERVICE AT ST LUKE'S CENTER - 7707 NW 2ND AVE -							
MIAMI, FL 33150	59-1279497	501 C (3)	6,162.	0.			GENERAL FUNDS
CC CHILD DEVELOPMENT SERVICES 970 SW 1ST ST STE 205 MIAMI, FL 33130	59-1279497	501 C (3)	157,261.	0.			GENERAL FUNDS
MIAMI, FI 33130	33 12/343/	301 C (3)	137,201.	· ·			GENERAL FUNDS
CC SERVICES FOR THE ELDERLY 9401 BISCAYNE BLVD.							
MIAMI, FL 33138	59-1279497	501 C (3)	72,985.	0.			GENERAL FUNDS
CCDH, INC. 7990 SW 117 AVE SUITE 135							
MIAMI, FL 33138	59-1617964	501 C (3)	50,026.	0.			GENERAL FUNDS
CENTER FOR FAMILY AND CHILD ENRICHMENT - 1825 N.W. 167TH ST							
STE 102 - MIAMI GARDENS, FL 33056	59-1775062	501 C (3)	70,683.	0.			GENERAL FUNDS
CENTER OF HOPE HAITI, INC. PO BOX 150							
STAMFORD, CT 06904	20-1002278	501 C (3)	23,800.	0.			GENERAL FUNDS
CENTRO CAMPESINO FARMWORKER CENTER P.O. BOX 343449							
HOMESTEAD, FL 33034	59-1460598	501 C (3)	162,641.	0.			GENERAL FUNDS
CENTRO MATER CHILD CARE SERVICES, INC 8298 NW 103RD STREET -							
HIALEAH GARDENS, FL 33016	20-8083301	501 C (3)	175,000.	0.			GENERAL FUNDS
CHABAD OF GRAMERCY PARK DBA YOUNG JEWISH PROFESSIONALS - 121 W 19TH							
ST - NEW YORK, NY 10011	13-3969811	501 C (3)	25,000.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAPMAN PARTNERSHIP, INC. 1550 NORTH MIAMI AVENUE MIAMI, FL 33136	65-0425069	501 C (3)	84,540.	0.			GENERAL FUNDS
CHARLES HUMPHREY KEATING IV FOUNDATION - 415 2ND ST - CORONADO, CA 92118	82-2075362	501 C (3)	10,000.	0.			GENERAL FUNDS
CHARLOTTE COMMUNITY FOUNDATION, INC 227 SULLIVAN ST - PUNTA GORDA, FL 33950	65-0455319		25,000.	0.			GENERAL FUNDS
CHICAGO COMMONS ASSOCIATION 515 E 50TH ST STE 200 CHICAGO, IL 60615	36-2169136	501 C (3)	10,034.	0.			GENERAL FUNDS
CHILD MIND INSTITUTE, INC. 445 PARK AVE NEW YORK, NY 10022	80-0478843	501 C (3)	15,000.	0.			GENERAL FUNDS
CHILDREN ACROSS BORDERS 3107 W DUNWOODIE ST TAMPA, FL 33629	26-2601630	501 C (3)	9,000.	0.			GENERAL FUNDS
CHILDREN'S BEREAVEMENT CENTER, INC 6619 SOUTH DIXIE HWY PMB 302 - SOUTH MIAMI, FL 33143	65-0918564	501 C (3)	24,271.	0.			GENERAL FUNDS
CHILDREN'S HOME SOCIETY OF FLORIDA, SOUTHEASTERN DIVISION - 800 NW 15 STREET - MIAMI, FL 33136-1495	59-0192430	501 C (3)	73,285.	0.			GENERAL FUNDS
CHIPS NETWORK, INC. 660 4TH ST PMB 350 SAN FRANCISCO, CA 94107	46-1198117	501 C (3)	12,500.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS Part II Continuation of Grants and Other A			and Domostic Co	vernmente (Sch	adula I (Form 900) Pa		9-0830840 Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTOPHER COLUMBUS HIGH SCHOOL							
3000 SW 87TH AVE.							
MIAMI, FL 33165	59-0855391	501 C (3)	18,895.	0.			GENERAL FUNDS
CHURCH OF THE EPIPHANY							
8081 s.w. 54TH COURT							
MIAMI, FL 33143	59-0711166	501 C (3)	7,820.	0.			GENERAL FUNDS
CITIZENS BUDGET COMMISSION							
2 PENN PLZ FL 5							
NEW YORK, NY 10121	13-0576141	501 C (3)	49,680.	0.			GENERAL FUNDS
NEW TORK, NT TOTZT	13 03/0141	501 C (5)	45,000.	0.			GENERAL FONDS
CITIZENS COMMITTEE FOR NEW YORK							
CITY, INC 77 WATER ST STE 202 -	51-0171818	E01 C (2)	0 000	0.			GENERAL FUNDS
NEW YORK, NY 10005 CITIZENS UNION FOUNDATION, INC. OF	31-01/1616	501 C (3)	8,800.	0.			GENERAL FUNDS
,							
THE CITY OF NEW YORK - 299							
BROADWAY STE 700 - NEW YORK, NY	12 5540100	501 6 (2)	14.620				
10007	13-5549188	501 C (3)	14,632.	0.			GENERAL FUNDS
CITRUS HEALTH NETWORK, INC.							
4175 WEST 20TH AVENUE	50 4065554	504 5 (0)	100.040				
HIALEAH, FL 33012-5835	59-1865751	501 C (3)	129,248.	0.			GENERAL FUNDS
CITY YEAR, INC.							
44 W FLAGLER ST. STE 500							
MIAMI, FL 33130	22-2882549	501 C (3)	50,000.	0.			GENERAL FUNDS
CLEVELAND CLINIC FLORIDA							
2950 CLEVELAND CLINIC BLVD							
WESTON, FL 33331	34-0714585	501 C (3)	9,400.	0.			GENERAL FUNDS
COCONUT GROVE CARES, INC.							
3870 WASHINGTON AVE.							
COCONUT GROVE, FL 33133	59-1263934	501 C (3)	102,880.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLEL CHABAD, INC. 806 EASTERN PARKWAY							
BROOKLYN, NY 11213	11-3254483	501 C (3)	34,000.	0.			GENERAL FUNDS
COLORADO OPEN GOLF FOUNDATION 20309 E 48TH PL							
DENVER, CO 80249	20-0377476	501 C (3)	45,120.	0.			GENERAL FUNDS
COLUMBIA BARNARD HILLEL, INC.							
NEW YORK, NY 10025	23-7077182	501 C (3)	20,000.	0.			GENERAL FUNDS
COMMERCIAL REAL ESTATE WOMEN FOUNDATION - 1201 WAKARUSA DR STE C3 - LAWRENCE, KS 66049	48-1201724	501 C (3)	10,000.	0.			GENERAL FUNDS
ES EMMERCE, NO COOLS	10 1201721	301 0 (3)	10,000.	•			
COMMON THREADS 3811 BEE CAVE RD STE 108 AUSTIN, TX 78746	20-0106847	501 C (3)	60,172.	0.			GENERAL FUNDS
COMMUNITY HEALTH OF SOUTH FLORIDA, INC 10300 S.W. 216TH ST -							
MIAMI, FL 33190-1003	59-1372690	501 C (3)	12,500.	0.			GENERAL FUNDS
COMMUNITY SMILES AKA DADE COUNTY DENTAL - 750 NW 20TH STREET -							
MIAMI, FL 33127	23-7372819	501 C (3)	69,978.	0.			GENERAL FUNDS
CONCUSSION LEGACY FOUNDATION 361 NEWBURY ST FL 5							
BOSTON, MA 02115	77-0689904	501 C (3)	10,000.	0.			GENERAL FUNDS
COPA HEALTH, INC. 924 N COUNTRY CLUB DR.							
MESA, AZ 85201	84-4608444	501 C (3)	10,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS Part II Continuation of Grants and Other A			and Domestic Go	vernments (Sch	edule I (Form 990) Pai		9-0830840 Pa
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORE COMMUNITY ORGANIZED RELIEF EFFORT - 6464 SUNSET BLVD STE 530 - LOS ANGELES, CA 90028	27-1703237	501 C (3)	35,000.	0.			GENERAL FUNDS
COREGIVING CO. 10920 VIA FRONTERA SAN DIEGO, CA 92127	83-2359767	501 C (3)	25,000.	0.			GENERAL FUNDS
CORPUS CHRISTI CATHOLIC CHURCH 3220 NW 7TH AVE MIAMI, FL 33127	53-0196617		5,480.	0.			GENERAL FUNDS
COUNCIL OF JEWISH EMIGRE COMMUNITY ORGANIZATION, INC - 40 EXCHANGE PL STE 1302 - NEW YORK, NY 10005	13-3955739		47,000.	0.			GENERAL FUNDS
COVENANT HOUSE 461 EIGHTH AVE NEW YOURK, NY 10001	13-2725416	501 C (3)	15,000.	0.			GENERAL FUNDS
COVENANT HOUSE GEORGIA, INC. 1559 JOHNSON RD NW ATLANTA, GA 30318	13-3523561	501 C (3)	18,920.	0.			GENERAL FUNDS
CROCKETT FOUNDATION P.O. BOX 3774 HALLANDALE BEACH, FL 33008	20-2689974	501 C (3)	8,170.	0.			GENERAL FUNDS
CROHN'S & COLITIS FOUNDATION OF AMERICA FLORIDA CHAPTER - 21301 POWERLINE ROAD STE 301 - BOCA RATON, FL 33434	13-6193105	501 C (3)	41,043.	0.			GENERAL FUNDS
CROHN'S & COLITIS FOUNDATION OF AMERICA, INC 733 THIRD AVE STE 510 - NEW YORK, NY 10017	13-6193105	501 C (3)	40,000.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CUBAN AMERICAN BAR FOUNDATION,							
INC 201 ALHAMBRA CIR STE 1205 - CORAL GABLES, FL 33134	83-0397116	501 C (3)	10,000.	0.			GENERAL FUNDS
CUBAN AMERICAN NATIONAL COUNCIL, INC 1223 S.W. 4TH STREET -			,				
MIAMI, FL 33135-2407	23-7269955	501 C (3)	30,000.	0.			GENERAL FUNDS
CURE RARE DISEASE, INC. 1575 TREMONT ST UNIT 1107							
BOSTON, MA 02120	82-2473513	501 C (3)	10,000.	0.			GENERAL FUNDS
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE STE 350N							
BETHESDA, MD 20814	13-1930701	501 C (3)	10,000.	0.			GENERAL FUNDS
DALLAS BAR ASSOCIATION COMMUNITY SERVICE FUND - 2101 ROSS AVE - DALLAS, TX 75201	75-2410525	501 C (3)	5,500.	0.			general funds
DALLAS CASA 2757 SWISS AVE							
DALLAS, TX 75204	75-1866204	501 C (3)	25,000.	0.			GENERAL FUNDS
DANIEL'S MUSIC FOUNDATION 1595 LEXINGTON AVE FL 2							
NEW YORK, NY 10029	32-0156199	501 C (3)	10,000.	0.			GENERAL FUNDS
DAVE AND MARY ALPER JCC 11155 S.W. 112 AVENUE							
MIAMI, FL 33176	59-2736411	501 C (3)	28,100.	0.			GENERAL FUNDS
DENVER PUBLIC LIBRARY FRIENDS FOUNDATION - 10 W 14TH AVE PKWY -							
DENVER, CO 80204	84-6036979	501 C (3)	26,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS				. (O-l-	- d. d. d. (F 2001) B		9-0830840 Pag
(a) Name and address of organization or government	Assistance to Dor	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPAUL UNIVERSITY 1 E JACKSON BLVD CHICAGO, IL 60604	36-2167048	501 C (3)	23,100.	0.			GENERAL FUNDS
DESIGN INDUSTRIES FOUNDATION FIGHTING AIDS, INC 2050 N STEMMONS FWY - DALLAS, TX 75207	13-3224150	501 C (3)	6,600.	0.			GENERAL FUNDS
DIABETES RESEARCH INSTITUTE FOUNDATION, INC. DRI - 200 S PARK RD STE 100 - HOLLYWOOD, FL 33021	59-1361955		209,802.	0.			GENERAL FUNDS
DIGESTIVE HEALTH FOUNDATION 251 E HURON ST STE 3-200 CHICAGO, IL 60611	47-4178944	501 C (3)	7,070.	0.			GENERAL FUNDS
DKMS 33 E 33RD ST STE 501 NEW YORK, NY 10016	20-0989212	501 C (3)	27,150.	0.			GENERAL FUNDS
DOUGLAS GARDENS COMMUNITY MENTAL HEALTH CENTER - 701 BRICKELL AVE SUITE 550 - MIAMI, FL 33131	59-1923396	501 C (3)	53,983.	0.			GENERAL FUNDS
DOWNTOWN DORAL ARTS AND CULTURE FOUNDATION, INC 2020 SALZEDO ST FL 5 - CORAL GABLES, FL 33134	85-3603763	501 C (3)	10,000.	0.			GENERAL FUNDS
DRESS FOR SUCCESS AUSTIN 701 TILLERY STE A5 BOX 11 AUSTIN, TX 78702	13-4220559	501 C (3)	11,000.	0.			GENERAL FUNDS
EAST HARLEM TUTORIAL PROGRAM 2050 2ND AVENUE NEW YORK, NY 10029	23-7439789	501 C (3)	30,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Γ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIGHTE GILLS OF THE WIGHT WASHINGTON							
EASTER SEALS GREATER WASHINGTON							
1420 SPRING ST	F2 0212206	E01 C /2)	25 000	0.			CENEDAI EINDC
SILVER SPRINGS, MD 20910	53-0212296	501 C (3)	25,000.	0.			GENERAL FUNDS
EASTER SEALS SOUTH FLORIDA, INC.							
1475 NW 14TH AVE							
MIAMI, FL 33125	59-0722783	501 C (3)	191,582.	0.			GENERAL FUNDS
ECONOMIC DEVELOPMENT CORPORATION			,				
OF LOS ANGELES COUNTY - 444 S							
FLOWER ST FL 37 - LOS ANGELES, CA							
90071	95-3643339	501 C (3)	10,000.	0.			GENERAL FUNDS
EDUCATE TOMORROW, CORP.							
1717 N. BAYSHORE DR. SUITE 203							
MIAMI, FL 33132	51-0493526	501 C (3)	20,694.	0.			GENERAL FUNDS
EDWARD M. KENNEDY INSTITUTE							
210 MORRISSEY BLVD COLUMBIA POINT	07 0063060	F01 @ (2)	05.000				
BOSTON, MA 02125	27-0963869	501 C (3)	25,000.	0.			GENERAL FUNDS
ENCOURAGE KIDS FOUNDATION							
1560 BROADWAY STE 600							
NEW YORK, NY 10036	13-3442216	501 C (3)	22,350.	0.			GENERAL FUNDS
nam rotat, ar roos	13 3112213	301 0 (3)	22,330.	•			
ENDURING HEARTS, INC.							
1205 JOHNSON FERRY RD STE 136-329							
MARIETTA, GA 30068	46-2665745	501 C (3)	11,954.	0.			GENERAL FUNDS
,			,				
EPILEPSY FLORIDA, INC.							
7300 N KENDALL DR STE 760							
MIAMI, FL 33156	59-2164525	501 C (3)	70,819.	0.			GENERAL FUNDS
EPIPHANY CATHOLIC SCHOOL & CHURCH							
8081 S.W. 54TH COURT							
MIAMI, FL 33143	53-0196617	501 C (3)	5,474.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EQUALITY CALIFORNIA INSTITUTE 3701 WILSHIRE BLVD STE 725 LOS ANGELES, CA 90010	68-0438008	501 C (3)	10,000.	0.			general funds
ESPERANZA MINISTRIES DBA CASA DEL LAGO - P.O. BOX 540342 - DALLAS, TX 75354	38-3934583	501 C (3)	10,000.	0.			GENERAL FUNDS
FAIRCHILD TROPICAL BOTANIC GARDEN 10901 OLD CUTLER RD CORAL GABLES, FL 33156	59-0668480		6,113.	0.			GENERAL FUNDS
FAMILY PROMISE OF MORRIS COUNTY, INC P.O. BOX 1494 - MORRISTOWN, NJ 07962	52-1572014		27,220.	0.			GENERAL FUNDS
FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC 155 S MIAMI AVE STE 400 - MIAMI, FL 33130-1617	59-1788265	501 C (3)	79,975.	0.			GENERAL FUNDS
FDNY FOUNDATION 9 METROTECH CENTER BROOKLYN, NY 11201	11-2632404	501 C (3)	23,400.	0.			GENERAL FUNDS
FEEDING SOUTH FLORIDA, INC. 2501 SW 32ND TER PEMBROKE PINES, FL 33023	59-2097520	501 C (3)	77,106.	0.			GENERAL FUNDS
FIREFIGHTER CANCER SUPPORT NETWORK 2600 W OLIVE AVE FL 5, PMB 608 BURBANK, CA 91505	20-4192265		7,699.	0.			GENERAL FUNDS
FIREWORK FOUNDATION C/O GSO 15260 VENTURA BLVD SHERMAN OAKS, CA 91403	45-3785398	501 C (3)	20,000.	0.			GENERAL FUNDS

	G MOLIN						59-08308 4 0 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST DEPARTMENT ASSIGNED COUNSEL							
CORPORATION - 11 PARK PL STE 1601							
- NEW YORK, NY 10007	13-3468351	501 C (3)	14,490.	0.			GENERAL FUNDS
NEW TORK, NT 10007	13 3400331	301 C (3)	14,450.	<u> </u>			CHARLET LONDS
FLORIDA ATLANTIC UNIVERSITY							
FOUNDATION - P.O. BOX 3091 - BOCA							
RATON, FL 33431	59-0917284	501 C (3)	186,000.	0.			GENERAL FUNDS
FLORIDA GRAND OPERA, INC.							
8390 NW 25 ST.							
MIAMI, FL 33122	65-0496477	501 C (3)	78,300.	0.			GENERAL FUNDS
FLORIDA INTERNATIONAL UNIVERSITY			,				
FOUNDATION, INC MARIA VARONA							
BENEFITS COORDINATOR PC 224 11200							
S.W UNIT MARC 531 - MIAMI, FL	23-7047106	501 C (3)	169,499.	0.			GENERAL FUNDS
FLORIDA LEADERSHIP VENTURE, INC.							
DBA ELEVATE ORLANDO, INC 2700							
WESTHALL LN STE 138 - MAITLAND, FL							
32751	26-3330456	501 C (3)	10,887.	0.			GENERAL FUNDS
FLORIDA TAXWATCH, INC.							
106 N BRONOUGH ST							
TALLAHASSEE, FL 32301	59-1918055	501 C (3)	10,000.	0.			GENERAL FUNDS
FOOD 1ST FOUNDATION							
420 LEXINGTON AVE FL 18							
NEW YORK, NY 10170	85-0792257	501 C (3)	17,500.	0.			GENERAL FUNDS
FOOD BANK OF THE ROCKIES							
10700 E 45TH AVE	04 0550650	E01 G (2)		_			
DENVER, CO 80239	84-0772672	DOT C (3)	5,200.	0.			GENERAL FUNDS
FOOD FOR THE POOR, INC.							
6401 LYONS RD							
COCONUT CREEK, FL 33073	59-2174510	501 C (3)	45,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa T	rt II.) T	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD FOR THOUGHT DENVER							
PO BOX 11813							
DEVER, CO 80211	81-2971428	501 C (3)	9,250.	0.			GENERAL FUNDS
FORD'S THEATER SOCIETY							
511 TENTH ST, NW							
WASHINGTON, DC 02004	52-6073157	501 C (3)	24,000.	0.			GENERAL FUNDS
FOSTER CARE REVIEW, INC. DBA	32 0073137	301 0 (3)	21,000.	•			
FLORIDA FOSTER CARE REVIEW - 4500							
BISCAYNE BLVD. STE 100 - MIAMI, FL							
33137	65-0118944	501 C (3)	87,932.	0.			GENERAL FUNDS
FRENCH-AMERICAN FOUNDATION							
28 W 44TH ST STE 1420							
NEW YORK, NY 10036	13-2847092	501 C (3)	47,500.	0.			GENERAL FUNDS
FRESH START WOMEN'S FOUNDATION							
1130 EAST MCDOWELL ROAD	86-0762610	E01 C (2)	25 200	0.			CENEDAL EUNDO
PHOENIX, AZ 85006	86-0762610	501 C (3)	25,200.	0.			GENERAL FUNDS
FRIENDS OF MCGILL UNIVERSITY, INC.							
44 PRYER TERR							
NEW ROCHELLE, NY 10804	23-7054819	501 C (3)	24,800.	0.			GENERAL FUNDS
·			·				
FRIENDS OF THE ISRAEL DEFENSE							
FORCES - 60 E 42ND ST - NEW YORK,							
NY 10165	13-3156445	501 C (3)	33,845.	0.			GENERAL FUNDS
FRIENDS OF UNITED HATZALAH							
208 E 51ST ST STE 303	11 2522000	E01 (2.)	100 000	•			CHMIDAL BUNDS
NEW YORK, NY 10022	11-3533002	DUI C (3)	100,000.	0.			GENERAL FUNDS
FRIENDSHIP CIRCLE NEW JERSEY, INC.							
10 MICROLAB RD							
LIVINGSTON, NJ 07039	46-3008950	501 C (3)	17,100.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Par	t II.)	Г
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP CIRCLE OF MIAMI, INC.							
8700 SW 112ST							
MIAMI, FL 33176	20-5467741	501 C (3)	12,681.	0.			GENERAL FUNDS
FUND FOR MODERN COURTS, INC.							
28 W 39TH ST							
NEW YORK, NY 10018	13-2597816	501 C (3)	21,250.	0.			GENERAL FUNDS
FUND FOR THE AGED, INC.							
120 W 106TH ST							
NEW YORK, NY 10025	13-3603516	501 C (3)	5,700.	0.			GENERAL FUNDS
,			,				
GABLESTAGE, INC.							
1200 ANASTASIA AVENUE							
CORAL GABLES, FL 33134	59-1972774	501 C (3)	10,675.	0.			GENERAL FUNDS
GAPABA LAW FOUNDATION, INC.							
483 WALDO ST SE							
ATLANTA, GA 30312	20-2369818	501 C (3)	8,500.	0.			GENERAL FUNDS
GARDEN OF DREAMS FOUNDATION							
2 PENN PLAZA FL 15							
NEW YORK, NY 10121	13-3979726	501 C (3)	50,000.	0.			GENERAL FUNDS
,							
GASKOV CLERGE FOUNDATION							
PO BOX 4068							
GARDEN CITY, NY 11531	51-0389906	501 C (3)	50,000.	0.			GENERAL FUNDS
GEORGE WEST MENTAL HEALTH							
FOUNDATION, INC. DBA SKYLAND TRAIL							
- 1961 N DRUID HILLS RD, NE -							
ATLANTA, GA 30329	58-1489941	501 C (3)	5,100.	0.			GENERAL FUNDS
GEORGIA ASYLUM & IMMIGRATION							
NETWORK - P.O. BOX 78425 -							
ATLANTA, GA 30357	26-1733523	501 C (3)	9,250.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pai	rt II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIFT OF LIFE MARROW REGISTRY, INC. 5901 BROKEN SOUND PKWY NW STE 600 BOCA RATON, FL 33487	22-3131232	501 C (3)	16,700.	0.			GENERAL FUNDS
GIRL POWER ROCKS, INC. 1600 NW 3RD AVE STE 100 MIAMI, FL 33136	65-0737649	501 C (3)	84,067.	0.			GENERAL FUNDS
GIRL SCOUT COUNCIL OF TROPICAL FLORIDA, INC 11347 S.W. 160TH STREET - MIAMI, FL 33157-2703	59-0651087	501 C (3)	126,645.	0.			GENERAL FUNDS
GLAMOURGALS FOUNDATION, INC. PO BOX 20488 NEW YORK, NY 10021	01-0565218	501 C (3)	19,100.	0.			GENERAL FUNDS
GLOBAL EMPOWERMENT MISSION, INC. 1810 NW 94TH AVE. DORAL, FL 33172	45-3782061	501 C (3)	10,000.	0.			general funds
GLOBAL GAMING WOMEN CHARITABLE EDUCATION FUND - 6841 S EASTERN AVE STE 1014 - LAS VEGAS, NV 89119	33-1123741	501 C (3)	10,000.	0.			GENERAL FUNDS
GOOD SPORTS, INC 1515 HANCOCK STREET STE 301 QUINCY, MA 02169	75-3138664	501 C (3)	15,000.	0.			GENERAL FUNDS
GOODWILL INDUSTRIES OF CENTRAL ARIZONA, INC 2626 W BERYL AVE - PHOENIX, AZ 85021	86-0104415	501 C (3)	20,000.	0.			GENERAL FUNDS
GOODWILL INDUSTRIES OF CENTRAL OHIO, INC - 1331 EDGEHILL RD - COLUMBUS, OH 43212	31-4379448	501 C (3)	10,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODWILL INDUGEDING OF GOVERN							
GOODWILL INDUSTRIES OF SOUTH FLORIDA, INC 2121 N.W. 21							
STREET - MIAMI, FL 33142-7317	59-0866126	501 C (3)	389,662.	0.			GENERAL FUNDS
GRACE MINISTRIES INTERNATIONAL OF			, , , , , , ,				
JACKSONVILLE, INC 4232							
GARIBALDI AVE - JACKSONVILLE, FL							
32210	59-3599469	501 C (3)	9,736.	0.			GENERAL FUNDS
CDEAMED MIANT HILLEL BOUNDAMION							
GREATER MIAMI HILLEL FOUNDATION 1100 STANFORD DR							
CORAL GABLES, FL 33146	52-1844823	501 C (3)	5,042.	0.			GENERAL FUNDS
011112 0112220, 12 00210	02 2011020	(0)	0,012.	•			
GREATER MIAMI JEWISH FEDERATION							
4200 BISCAYNE BLVD.							
MIAMI, FL 33137-3210	59-0624404	501 C (3)	1,502,663.	0.			GENERAL FUNDS
GDEAMED MIANT GEDVICE GODDG							
GREATER MIAMI SERVICE CORPS 810 NW 28TH ST							
MIAMI, FL 33127	65-0221820	501 C (3)	25,451.	0.			GENERAL FUNDS
,							
GREATER MIAMI YOUTH FOR CHRIST							
9350 SW 79TH AVE							
MIAMI, FL 33156	59-6033466	501 C (3)	9,246.	0.			GENERAL FUNDS
GROVE PARK FOUNDATION, INC.							
1566 DONALD LEE HOLLOWELL PKWY NW S							
ATLANTA, GA 30318	82-1913260	501 C (3)	10,000.	0.			GENERAL FUNDS
	02 2320200	(0)	20,000.	•			
GUITARS OVER GUNS ORGANIZATION,							
INC 169 E FLAGLER ST STE 1134 -							
MIAMI, FL 33131	26-2644682	501 C (3)	17,154.	0.			GENERAL FUNDS
GULF COAST JUNIOR GOLF TOUR, INC							
DBA THE FIRST TEE OF							
NAPLES/COLLIER 1370 CREEKSIDE BLVD	6E 0477025	E01 G (3)	10.000	_			GENEDAL BUNDS
- NAPLES, FL 34108	65-0477835	DOT G (3)	10,000.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILLTWED COMOOLG TWO							
GULLIVER SCHOOLS, INC. 9350 S DIXIE HWY FL 11							
	6F 0000712	F01 G (2)	0.000	0			GENEDAL BUNDO
MIAMI, FL 33156	65-0900712	501 C (3)	9,000.	0.			GENERAL FUNDS
HAILEY'S HOPE FOUNDATION							
P.O. BOX 32							
GOSHEN, NY 10065	26-1387176	501 C (3)	8,000.	0.			GENERAL FUNDS
,			1,000				
HAITIAN AMERICAN NURSES							
ASSOCIATION OF FLORIDA, INC PO							
BOX 695069 - MIAMI, FL 33269	59-2463138	501 C (3)	20,000.	0.			GENERAL FUNDS
HAITIAN GLOBAL HEALTH ALLIANCE,							
INC 68 JAY ST STE201 -							
BROOKLYN, NY 11201	98-0158310	501 C (3)	20,000.	0.			GENERAL FUNDS
HAITIAN HEALTH FOUNDATION, INC.							
97 SHERMAN ST							
NORWICH, CT 06360	06-1135999	501 C (3)	15,000.	0.			GENERAL FUNDS
HANYC FOUNDATION, INC.							
34 E 51ST ST FLOOR 8 STE 5							
	83-3283722	E01 G (2)	9,680.	0.			GENERAL FUNDS
NEW YORK, NY 10022	03-3203722	501 C (3)	9,000.	0.			GENERAL FUNDS
HEADSTRONG PROJECT, INC.							
655 MADISON AVE FL 18							
NEW YORK, NY 10065	45-5261907	501 C (3)	116,000.	0.			GENERAL FUNDS
HEALTHY MOTHERS-HEALTHY BABIES	12 2201307	(0/	210,000.	0.			
COALITION OF BROWARD COUNTY, -							
3810 INVERRARY BLVD. STE 305 -							
LAUDERHILL, FL 33319	65-0161493	501 C (3)	15,000.	0.			GENERAL FUNDS
	33 0101133		13,300.	٠.			
HEALTHY START COALITION OF							
MIAMI-DADE - 7205 NW 19TH STREET							
STE 500 - MIAMI, FL 33125	65-1102736	501 C (3)	52,990.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO	S G MOLIN	A				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARING AND SPEECH CENTER OF FLORIDA, INC 9425 SW 72ND STREET SUITE 261 - MIAMI, FL 33173	59-0668488	501 C (3)	168,546.	0.			GENERAL FUNDS
HEARST PROJECT LYME 223 UNION ST ROCKPORT, ME 04856	81-1138289	501 C (3)	10,000.	0.			GENERAL FUNDS
HEARTLAND ALLIANCE FOR HUMAN NEEDS & HUMAN RIGHTS - 208 S LA SALLE ST	36-1877640		9,720.	0.			GENERAL FUNDS
HENRY W. GRADY FOUNDATION, INC. 191 PEACHTREE ST, NE STE 820			,	0.			
ATLANTA, GA 30303 HER JUSTICE, INC. 100 BROADWAY FL 10 NEW YORK, NY 10005	58-2130437		9,800.	0.			GENERAL FUNDS GENERAL FUNDS
HFS CHICAGO SCHOLARS 1074 W TAYLOR ST STE 201 CHICAGO, IL 60607	36-3922345	501 C (3)	10,000.	0.			GENERAL FUNDS
HIS HOUSE CHILDREN'S HOME 20000 N.W. 47TH AVENUE BUILDING # 2 MIAMI, FL 33055-1543	65-0145994	501 C (3)	34,372.	0.			GENERAL FUNDS
HISTORICAL SOCIETY OF THE NEW YORK COURTS - 140 GRAND ST STE 701 - WHITE PLAINS, NY 10601	82-0554364	501 C (3)	20,000.	0.			GENERAL FUNDS
HOPE FOR HAITI, INC. 1021 5TH AVE. NORTH NAPLES, FL 34102	59-3564329	501 C (3)	35,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pai	rt II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOSPICE OF PALM BEACH COUNTY, INC. 5300 EAST AVE WEST PALM BEACH, FL 33407	59-1825937	501 C (3)	7,500.	0.			GENERAL FUNDS
HOUSTON LIVESTOCK SHOW AND RODEO, INC 8334 FANNIN ST - HOUSTON, TX 77054	74-1142851	501 C (3)	10,000.	0.			GENERAL FUNDS
HUMAN OPTIONS, INC 5540 TRABUCO RD STE 100 IRVINE, CA 92620	95-3667817	501 C (3)	31,250.	0.			GENERAL FUNDS
HUMAN SERVICES COUNCIL OF NEW YORK 130 E 59TH ST NEW YORK, NY 10022	13-3620059	501 C (3)	10,000.	0.			GENERAL FUNDS
HUMANE SOCIETY OF GREATER MIAMI & ADOPT A PET - 16101 W DIXIE HWY - NORTH MIAMI BEACH, FL 33160	59-0711176	501 C (3)	5,840.	0.			GENERAL FUNDS
ICU BABY, INC 88 W. MCINTYRE STREET SUITE 200 KEY BISCAYNE, FL 33149	83-0693300	501 C (3)	19,667.	0.			GENERAL FUNDS
IGNATIAN SPIRITUALITY CENTER, INC. 12190 SW 56TH ST MIAMI, FL 33175	59-1841899	501 C (3)	6,000.	0.			GENERAL FUNDS
INSTITUTE FOR CHILD AND FAMILY HEALTH, INC 15490 N.W. 7TH AVE STE 200 - MIAMI, FL 33169-6201	59-0866060	501 C (3)	104,022.	0.			GENERAL FUNDS
INSTITUTE FOR INCLUSION IN THE LEGAL PROFESSION - 321 S PLYMOUTH CT FL 7 - CHICAGO, IL 60604	27-0888460	501 C (3)	10,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSTITUTE OF CONTEMPORARY ART							
MIAMI - 61 NE 41ST ST - MIAMI, FL							
33137	47-1251523	501 C (3)	313,250.	0.			GENERAL FUNDS
33137	47 1231323	301 C (3)	313,230.	0.			GENERAL FONDS
INTERNATIONAL JUSTICE MISSION							
P.O. BIOX 58147							
WASHINGTON, DC 20037	54-1722887	501 C (3)	11,820.	0.			GENERAL FUNDS
,			,				
ISRAAID (US) GLOBAL HUMANITARIAN							
ASSISTANCE, INC - PO BOX 61227 -							
PALO ALTO, CA 94306	46-2118225	501 C (3)	10,000.	0.			GENERAL FUNDS
			·				
JACKSON HEALTH FOUNDATION, INC.							
1501 NW NORTH RIVER DR FL 1							
MIAMI, FL 33125	65-0077727	501 C (3)	65,849.	0.			GENERAL FUNDS
JEWISH ADOPTION AND FOSTER CARE							
OPTIONS - (JAFCO) 4200 NORTH							
UNIVERSITY DRIVE - SUNRISE, FL							
33351	20-0898587	501 C (3)	6,140.	0.			GENERAL FUNDS
JEWISH COMMUNITY RELATIONS COUNCIL							
OF NEW YORK - 700 W 36TH ST STE							
700 - NEW YORK, NY 10018	13-2869041	501 C (3)	6,800.	0.			GENERAL FUNDS
JEWISH COMMUNITY SERVICES OF SOUTH							
FLORIDA , INC 12000 BISCAYNE	F0 0628068	F01 ~ (2)	0 455 504	•			
BLVD - MIAMI, FL 33181	59-0637867	501 C (3)	2,477,794.	0.			GENERAL FUNDS
JEWISH COUNCIL FOR YOUTH SERVICES							
180 W WASHINGTON ST STE 1100							
	36-2193616	501 C (3)	7,500.	0.			GENERAL FUNDS
CHICAGO, IL 60602	30-2193010	301 ((3)	7,500.	0.			GENEVAL LONDS
JEWISH FEDERATION COUNCIL OF GTR.							
LOS ANGELES - 6505 WILSHIRE BLVD.							
STE 1025 - LOS ANGELES, CA 90048	95-1643388	501 C (3)	60,000.	0.			GENERAL FUNDS
	25 2010000	(0)	1 00,000.	٠.	l	1	Schodule I (Form 9)

	S G MOLIN			. (0.1	11.1(5		9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF CLEVELAND 25701 SCIENCE PARK DR							
CL, OH 44122	34-0714445	501 C (3)	10,000.	0.			GENERAL FUNDS
JEWISH FEDERATION OF GREATER ATLANTA - 1440 SPRING ST NW, - ATLANTA, GA 30309	58-1021791	501 C (3)	8,500.	0.			GENERAL FUNDS
JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY - 9901 DONNA KLEIN							
BLVD BOCA RATON, FL 33428	59-1945109	501 C (3)	50,000.	0.			GENERAL FUNDS
JEWISH NATIONAL FUND - NEW YORK 42 E 69TH ST NEW YORK, NY 10021	13-1659627	501 C (3)	36,300.	0.			GENERAL FUNDS
JOHN BUCK COMPANY FOUNDATION 225 W WASHINGTON ST STE 2300			,				
CHICAGO, IL 60606	02-0569830	501 C (3)	24,700.	0.			GENERAL FUNDS
JORGE M. PEREZ ART MUSEUM OF MIAMI-DADE COUNTY, INC 1103	F0 20400C0	F01 G (2)	10.760				
BISCAYNE BLVD MIAMI, FL 33132	59-2048869	501 C (3)	18,760.	0.			GENERAL FUNDS
JUDGES AND LAWYERS BREAST CANCER ALERT, INC 100 CROSBY ST STE							
303 - NEW YORK, NY 10012	13-3679981	501 C (3)	22,000.	0.			GENERAL FUNDS
JUNIOR ACHIEVEMENT OF CHICAGO 651 W WASHINGTON BLVD STE 404 CHICAGO, IL 60661	36-2170141	501 C (3)	7,500.	0.			GENERAL FUNDS
JUNIOR ACHIEVEMENT OF GEORGIA 460 ABERNATHY RD, NE				·			
ATLANTA, GA 30328	58-0598050	501 C (3)	38,635.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pai	t II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF GREATER MIAMI - 2124 NE 123RD ST STE 218A - NORTH MIAMI, FL 33181	59-0807486	501 C (3)	10,837.	0.			GENERAL FUNDS
JUVENILE DIABETES RESEARCH FOUNDATION - SOUTH FLORIDA CAHPTER 3411 NW 9TH AVE - FORT LAUDERDALE, FL 33309	23-1907729	501 C (3)	5,223.	0.			GENERAL FUNDS
KARA 457 KINGSLEY AVE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PALO ALTO, CA 94301	94-2431483	501 C (3)	7,000.	0.			GENERAL FUNDS
KEEP MEMORY ALIVE 888 W BONNEVILLE AVE LAS VEGAS, NV 89106	88-0515534	501 C (3)	18,000.	0.			GENERAL FUNDS
KEY BISCAYNE COMMUNITY FOUNDATION 240 CRANDON BLVD STE 108 KEY BISCAYNE, FL 33149	30-0239421	501 C (3)	434,343.	0.			GENERAL FUNDS
KIDS IN DISTRESS INC. 819 NE 26 STREET							
FT LAUDERDALE, FL 33305-1239 KIND, INC. 1300 L ST NW STE 1100	59-1927289	301 C (3)	40,000.	0.			GENERAL FUNDS
WASHINGTON, DC 20005	26-2763038	501 C (3)	12,450.	0.			GENERAL FUNDS
KOLLEL OHEL TORAH AN ILLINOIS NOT FOR PROFIT CORPORATION - 3635 W DEVON AVE - CHICAGO, IL 60659	27-0158099	501 C (3)	50,000.	0.			GENERAL FUNDS
KRISTI HOUSE, INC. 1265 NW 12TH AVE. MIAMI, FL 33136	65-0576650	501 C (3)	5,447.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.)	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
L.I.V.E. LEAD, INNOVATE, VOLUNTEER							
& EMPOWER, INC 11401 SW 88TH							
AVE - MIAMI, FL 33176	81-1106219	501 C (3)	7,156.	0.			GENERAL FUNDS
MIMI, 11 33170	01 1100219	301 C (3)	7,150.	· ·			CENTRAL TORDS
LA LIGA CONTRA EL CANCER							
2180 S.W. 12TH AVE.							
MIAMI, FL 33129	59-1629554	501 C (3)	6,060.	0.			GENERAL FUNDS
,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
LAMBDA LEGAL DEFENSE AND EDUCATION							
FUND - 120 WALL ST STE 1900 - NEW							
YORK, NY 10005	23-7395681	501 C (3)	27,500.	0.			GENERAL FUNDS
,			1				
LAMBI FUND OF HAITI							
1050 CONNECTICUT AVE. NW STE. 500							
WASHINGTON, DC 20036	52-1843357	501 C (3)	45,000.	0.			GENERAL FUNDS
LAS VEGAS PERFORMING ARTS CENTER							
FOUNDATION - AKA THE SMITH CENTER							
361 SYMPHONY PARK AVE - LAS							
VEGAS, NV 89103	88-0361875	501 C (3)	20,000.	0.			GENERAL FUNDS
LATIN GRAMMY CULTURAL FOUNDATION							
3470 NW 82ND AVE STE 700							
DORAL, FL 33122	46-4770436	501 C (3)	15,000.	0.			GENERAL FUNDS
LATINOJUSTICE PRLDEF							
99 HUDSON ST FL 14							
NEW YORK, NY 10013	13-2722664	501 C (3)	25,000.	0.			GENERAL FUNDS
LAW FOUNDATION OF SILICON VALLEY							
152 N 3RD ST FL 3	E0 1011E:	501 7 (2)		-			
SAN JOSE, CA 95112	52-1014754	DOT C (3)	7,500.	0.			GENERAL FUNDS
I AMIVED C ALL TANCE BOD NEW YORK							
LAWYERS ALLIANCE FOR NEW YORK							
171 MADISON AVE FL 6	13-2666432	501 C (3)	47 500	0.			GENERAL FINDS
NEW YORK, NY 10016	13-2000432	DOT C (2)	47,500.	٥.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAWYERS COMMITTEE FOR CIVIL RI SUITE 400 1401 NEW YORK AVE. N.W.	F2 070024 <i>C</i>	E01 G (2)	20.000	0			GENERAL BUNDS
WASHINGTON, DC 20005 LEADERSHIP FLORIDA STATEWIDE COMMUNITY FOUNDATION, INC 3500 FINANCIAL PLAZA STE 300 -	52-0799246	501 C (3)	30,000.	0.			GENERAL FUNDS
TALLAHASSE, FL 32312	59-3201445	501 C (3)	5,184.	0.			GENERAL FUNDS
LEGAL AID OF NORTHWEST TEXAS 600 E WEATHERFORD ST FORTH WORTH, TX 76102	75-0856086	501 C (3)	14,625.	0.			GENERAL FUNDS
FORTH WORTH, 12 70102	73-0030000	301 C (3)	14,023.	0.			GENERAL FUNDS
LEGAL INFORMATION FOR FAMILIES TODAY - 32 COURT ST STE 1208 -	42 2040555						
BROOKLYN, NY 11201	13-3910567	501 C (3)	23,200.	0.			GENERAL FUNDS
LEGAL SERVICES OF GREATER MIAMI, INC 4343 WEST FLAGLER ST STE 100 - MIAMI, FL 33137	59-1227481	501 C (3)	174,282.	0.			GENERAL FUNDS
LEHRMAN COMMUNITY DAY SCHOOL, INC. 727 77TH ST							
MIAMI BEACH, FL 33141	65-1119268	501 C (3)	32,750.	0.			GENERAL FUNDS
LEISURE ACCESS FOUNDATION 18851 NE 29TH AVE. STE 1010							
AVENTURA, FL 33180	65-0281274	501 C (3)	9,970.	0.			GENERAL FUNDS
LESBIAN & GAY COMMUNITY SERVICES CENTER - 208 W 13TH ST - NEW							
YORK, NY 10011	13-3217805	501 C (3)	9,506.	0.			GENERAL FUNDS
LESBIAN AND GAY LAW ASSOCIATION FOUNDATION OF GREATER NEW YORK 601 W 26TH ST STE 325-20 - NEW YORK,							
NY 10001	13-3828712	501 C (3)	7,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO	S G MOLIN	A				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIFE SCIENCE CARES, INC. PO BOX 425486							
CAMBRIDGE, MA 02142	81-2435939	501 C (3)	10,000.	0.			GENERAL FUNDS
LINK UNLIMITED SCHOLARS 2221 S STATE ST							
CHICAGO, IL 60616	23-7386928	501 C (3)	8,500.	0.			GENERAL FUNDS
LION GLOBAL FOUNDATION 4350 S MONACO ST FL 5							
DENVER, CO 80237	68-0561084	501 C (3)	23,400.	0.			GENERAL FUNDS
LITTLE HAVANA ACTIVITIES AND NUTRITION CTRS. OF DADE COUNTY - 700 SW 8TH STREET - MIAMI, FL							
33130-3311	23-7378008	501 C (3)	135,864.	0.			GENERAL FUNDS
LOUIS HERNANDEZ JR'S FOUNDATION FOR A BRIGHT FUTURE, INC 3951 S OCEAN DR UNIT 1603 - HOLLYWOOD, FL							
33019	46-0787800	501 C (3)	25,000.	0.			GENERAL FUNDS
LUPUS RESEARCH ALLIANCE, INC. 275 MADISON AVE FL 10							
NEW YORK, NY 10016	58-2492929	501 C (3)	22,700.	0.			GENERAL FUNDS
MAESTRO CARES FOUNDATION 1459 W HUBBARD ST							
CHICAGO, IL 60642	45-3706112	501 C (3)	12,500.	0.			GENERAL FUNDS
MAKE A WISH FOUNDATION OF SOUTHERN FLORIDA, INC 4491 S STATE RD 7							
STE 201 - FT LAUDERDALE, FL 33314	59-2620322	501 C (3)	31,762.	0.			GENERAL FUNDS
MAKE-A-WISH FOUNDATION SOUTHERN NEVADA - 9950 COVINGTON CROSS DR							
- LAS VEGAS, NV 89144	88-0371088	501 C (3)	15,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	t II.)	Г
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MALTZ JUPITER THEATER, INC. 1001 E INDIANTOWN JUPITER, FL 33408	65-0985652	501 C (3)	20,000.	0.			GENERAL FUNDS
MAN DODO HUMANITARIAN FOUNDATION, INC 3333 NW 168TH STREET - MIAMI GARDENS, FL 33056	26-3762987	501 C (3)	38,475.	0.			GENERAL FUNDS
MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC 5342 TILLY MILL ROAD - DUNWOODY, GA 30338	58-0566126		18,600.	0.			GENERAL FUNDS
MEMORIAL HERMANN FOUNDATION 929 GESSNER STE 2650 HOUSTON, TX 77024	74-1653640	501 C (3)	10,000.	0.			GENERAL FUNDS
METROPOLITAN FAMILY SERVICES ONE NORTH DEARBORN STE 1000 CHICAGO, IL 60602	36-2167940	501 C (3)	6,500.	0.			GENERAL FUNDS
MIAMI BEACH JEWISH COMMUNITY CENTER, INC - 4221 PINE TREE DR - MIAMI BEACH, FL 33140	59-2788834	501 C (3)	8,825.	0.			GENERAL FUNDS
MIAMI BRIDGE YOUTH & FAMILY SERVICES - 2810 NW SOUTH RIVER DR - MIAMI, FL 33125	59-2569847	501 C (3)	184,721.	0.			GENERAL FUNDS
MIAMI CHILDRENS HEALTH SYSTEM, INC. DBA NICKLAUS CHILDREN'S - 3100 S.W. 62ND AVENUE STE 300 - MIAMI, FL 33155	45-3481327	501 C (3)	14,481.	0.			GENERAL FUNDS
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33132	59-2396999	501 C (3)	10,365.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO	S G MOLIN	A				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIAMI COALITION OF CHRISTIANS AND JEWS, INC 150 SE 2ND AVE STE 1004 - MIAMI, FL 33131	20-3534284	501 C (3)	16,000.	0.			GENERAL FUNDS
MIAMI DADE COLLEGE FOUNDATION, INC 300 NE 2ND AVENUE - MIAMI, FL 33132	59-6169745	501 C (3)	39,796.	0.			GENERAL FUNDS
MIAMI JEWISH HEALTH SYSTEM, INC. 5200 NE 2ND AVE MIAMI, FL 33137	59-0624414	501 C (3)	9,080.	0.			GENERAL FUNDS
MIAMI LIGHTHOUSE FOR THE BLIND & VISUALLY IMPAIRED, INC 601 SW 8TH AVE - MIAMI, FL 33130	59-0637847		30,623.	0.			GENERAL FUNDS
MICHAEL-ANN RUSSELL JEWISH COMMUNITY - 18900 NE 25TH AVE - NORTH MIAMI BEACH, FL 33180	59-2791269		89,955.	0.			GENERAL FUNDS
MINDO FUTURES, INC. 3500 E GLENCOE ST MIAMI, FL 33133	26-3516981	501 C (3)	5,630.	0.			GENERAL FUNDS
MINORITY CORPORATE COUNSEL ASSOCIATION, INC 1111 PENNSYLLVANIA AVE. NW - WASHINGTON, DC 20004	13-3920905	501 C (3)	10,000.	0.			GENERAL FUNDS
MOBILIZATION FOR JUSTICE, INC. 100 WILLIAM ST FL 6 NEW YORK, NY 10038	13-2622748		21,000.	0.			GENERAL FUNDS
MONIRA FOUNDATION 888 NEWARK AVE JERSEY CITY, NJ 07306	83-2861500		10,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS							9-0830840 Pa
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pai T	t II.) T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT SINAI MEDICAL CENTER FOUNDATION - 4300 ALTON RD STE 100							
- MIAMI BEACH, FL 33140	59-1711400	501 C (3)	50,750.	0.			GENERAL FUNDS
MUSEUM OF SCIENCE 1 SCIENCE PARK							
BOSTON, MA 02114	04-2103916	501 C (3)	7,050.	0.			GENERAL FUNDS
MUSICARES FOUNDATION, INC. 3030 OLYMPIC BLVD.							
SANTA MONICA, CA 90404	95-4470909	501 C (3)	49,500.	0.			GENERAL FUNDS
MUSLIM PUBLIC AFFARIS COUNCIL FOUNDATION - 3010 WILSHIRE BLVD STE 217 - LOS ANGELES, CA 90010	95-4675391	501 C (3)	10,000.	0.			GENERAL FUNDS
SIE ZIT - HOS ANGELES, CA 90010	93-4073391	301 C (3)	10,000.	<u> </u>			GENERAL FUNDS
NAMI OF MIAMI, INC. P.O. BOX 430230							
MIAMI, FL 33243	59-2207150	501 C (3)	50,000.	0.			GENERAL FUNDS
NATIONAL BLACK ARTS FESTIVAL, INC. 235 PEACHTREE ST NE STE 1725							
ATLANTA, GA 30303	58-1736780	501 C (3)	20,750.	0.			GENERAL FUNDS
NATIONAL CENTER FOR LAW AND ECONOMIC JUSTICE - 275 7TH AVE STE							
1506 - NEW YORK, NY 10001	23-7311208	501 C (3)	50,000.	0.			GENERAL FUNDS
NATIONAL COUNCIL ON PATENT 931 MONROE DR, NE STE A102-466							
ATLANTA, GA 30308	82-4445281	501 C (3)	10,000.	0.			GENERAL FUNDS
NATIONAL JEWISH HEALTH 1400 JACKSON ST UNIT M217							
DENVER, CO 80206	74-2044647	501 C (3)	10,770.	0.			GENERAL FUNDS

Part II Continuation of Grants and Other A			and Damastic Co	versus (Sobr	adula I (Form 000) Bar		9-0830840 Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL JEWISH HEALTH - NEW YORK 271 MADISON AVE. FL 19 NEW YORK, NY 10016	74-2044647	501 C (3)	29,880.	0.			GENERAL FUNDS
NATIONAL JEWISH POLICY CENTER 50 F STREET, NW STE 100 WASHINGTON, DC 20001	52-1433850	501 C (3)	15,000.	0.			GENERAL FUNDS
NATIONAL URBAN LEAGUE, INC. 8 PINE ST FL 9 NEW YORK, NY 10005	13-1840489	501 C (3)	15,000.	0.			GENERAL FUNDS
NEVADA BALLET THEATRE, INC 1651 INNER CIR LAS VEGAS, NV 89134	94-2427112	501 C (3)	12,000.	0.			GENERAL FUNDS
NEW ALTERNATIVES FOR CHILDREN, INC 37 W 26TH ST - NEW YORK, NY 10010	13-3149298	501 C (3)	22,650.	0.			GENERAL FUNDS
NEW AMERICA ALLIANCE INSITUTE 8150 N CENTRAL EXPY DALLAS, TX 75206	54-1072411	501 C (3)	10,000.	0.			GENERAL FUNDS
NEW HORIZONS COMMUNITY MENTAL HEALTH CTR 1469 NW 36TH ST STE 400 - MIAMI, FL 33142	59-2055751	501 C (3)	52,088.	0.			GENERAL FUNDS
NEW JERSEY PERFORMING ARTS CENTER CORPORATION - 1 CENTER ST NEWARK, NJ 07102	22-2889703	501 C (3)	50,000.	0.			GENERAL FUNDS
NEW JERSEY SEEDS, INC. 494 BROAD ST. STE 105 NEWARK, NJ 07102	22-3181507	501 C (3)	20,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW WORLD SYMPHONY							
500 17TH ST							
MIAMI BEACH, FL 33139	59-2809056	501 C (3)	110,000.	0.			GENERAL FUNDS
NEW YORK EDGE, INC.							
58-12 QUEENS BLVD STE 1							
WOODSIDE, NY 11377	11-3112635	501 C (3)	22,450.	0.			GENERAL FUNDS
NEW YORK I NU GOVOOL							
NEW YORK LAW SCHOOL							
57 WORTH ST.	42 5645005						
NEW YORK, NY 10013	13-5645885	501 C (3)	9,900.	0.			GENERAL FUNDS
NEW YORK LEAGUE OF CONSERVATION							
VOTERS EDUCATION FUND, INC 30							
BROAD ST FL 30 - NEW YORK, NY							
10004	13-3727122	501 C (3)	7,350.	0.			GENERAL FUNDS
NEW YORK LEGAL ACCIONANCE CHOID							
NEW YORK LEGAL ASSISTANCE GROUP,							
INC 450 W 33RD ST FL 11 - NEW	12 2505420	E01 G (2)	14 100	,			GENEDAL ELINDO
YORK, NY 10001	13-3505428	501 C (3)	14,100.	0.			GENERAL FUNDS
NEW YORK UNIVERSITY							
25 W 4TH ST FL 4							
NEW YORK, NY 10012	13-5562308	501 C (3)	67,500.	0.			GENERAL FUNDS
NEW YORKERS FOR PARKS							
55 BROAD ST. FL 23							
NEW YORK, NY 10004	13-6167879	501 C (3)	9,000.	0.			GENERAL FUNDS
NORTH MIAMI BEACH KOLLEL, INC.							
DBA KOLLEL ZICHRON MICHEL OF NORTH							
MIAMI BEACH 990 NE 175TH ST -							
MIAMI, FL 3	46-4360732	501 C (3)	10,369.	0.			GENERAL FUNDS
NORTHERN NEW JERSEY COUNCIL BOY							
SCOUTS - 25 RAMAPO VALLEY RD -							
OAKLAND, NJ 07436	22-3626147	501 C (3)	7,056.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Pa
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NGODO BOUNDAMION ING							
NSORO FOUNDATION, INC. PO BOX 724445							
ATLANTA, GA 31139	87-0758361	501 C (3)	16,000.	0.			GENERAL FUNDS
OCEAN REEF FOUNDATION							
35 OCEAN REEF DR.							
KEY LARGO, FL 33037	65-0509255	501 C (3)	20,000.	0.			GENERAL FUNDS
ONEJUSTICE							
1055 WILSHIRE BLVD STE 1660	04.0500403	E01 @ (2)	22 125				
LOS ANGELES, CA 90017	94-2589423	501 C (3)	28,125.	0.			GENERAL FUNDS
OPEN DOOR HEALTH CENTER, INC.							
P.O. BOX 901642							
HOMESTEAD, FL 33030	83-0375996	501 C (3)	51,527.	0.			GENERAL FUNDS
·			,				
OPEN DOORS SOLUTIONS, INC.							
321 W HILL ST STE 2E							
DECATUR, GA 30030	83-0841949	501 C (3)	50,000.	0.			GENERAL FUNDS
OVERNOUN VOUMU GENMED INC							
OVERTOWN YOUTH CENTER, INC. 450 N.W. 14TH STREET							
MIAMI, FL 33136	65-1048896	501 C (3)	813,356.	0.			GENERAL FUNDS
	00 2010000	(0)	020,000.	•			
PACE CENTER FOR GIRLS, INC -							
MIAMI-DADE - 1400 NW 36TH ST STE							
200 - MIAMI, FL 33142	59-2414492	501 C (3)	10,279.	0.			GENERAL FUNDS
DAGE HNITVERGIMV							
PACE UNIVERSITY 1 PACE PLZ							
NEW YORK, NY 10038	13-5562314	501 C (3)	6,500.	0.			GENERAL FUNDS
10111, 11 10000	13 3302314	001 0 (0)	0,300.	<u> </u>			
PAGE EDUCATION FOUNDATION							
901 N 3RD ST STE 355							
MINNEAPOLIS, MN 55401	36-3605013	501 C (3)	24,521.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALMER TRINITY PRIVATE SCHOOL,							
INC 7900 S.W. 176 TH STREET -							
PALMETTO BAY, FL 33157	23-7098500	501 C (3)	59,747.	0.			GENERAL FUNDS
•			,				
PANDA CARES FOUNDATION, INC.							
1683 WALNUT GROVE AVE							
ROSEMEAD, CA 91770	81-2094929	501 C (3)	21,760.	0.			GENERAL FUNDS
PHILANTHROPY MASSACHUSETTS							
133 FEDERAL ST SUITE 802	04 0457605	E01 G (2)	15 700	0			GENERAL BUNDS
BOSTON, MA 02110	04-2457605	501 C (3)	15,700.	0.			GENERAL FUNDS
PINK AID, INC.							
PO BOX 5157							
WESTPORT, CT 06881	47-1031835	501 C (3)	10,000.	0.			GENERAL FUNDS
,			,				
POLICE OFFICERS ASSISTANCE TRUST,							
INC 1030 NW 111TH AVE. STE 232							
- DORAL, FL 33172	65-0164129	501 C (3)	130,789.	0.			GENERAL FUNDS
PRESTIGE CLUB OF SOUTHWEST							
BROWARD, INC 6191 ORANGE DR.	65 0545504	504 5 (0)	45.000				
STE 6173 - DAVIE, FL 33314	65-0717521	501 C (3)	17,000.	0.			GENERAL FUNDS
PRO BONO INSTITUTE							
1001 G STREET NW STE 305 W							
WASHINGTON, DC 20001	52-1991509	501 C (3)	15,000.	0.			GENERAL FUNDS
MISHINGTON, BC 20001	32 1331303	301 C (3)	13,000.	0.			CENTRAL I GNDS
PRODEV USA FOUNDATION, INC.							
315 NE 98TH ST.							
MIAMI SHORES, FL 33138	30-0690934	501 C (3)	35,000.	0.			GENERAL FUNDS
PROJECT BIOME, INC.							
4351 SEMINOLE TRAIL							
CHARLOTTESVILLE, VA 38119	83-3364077	501 C (3)	15,000.	0.			GENERAL FUNDS

	S G MOLIN						9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.)	Τ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROJECT MEDISHARE FOR HAITI, INC 8260 NE 2ND AVENUE							
MIAMI, FL 33020	65-0965848	501 C (3)	45,000.	0.			GENERAL FUNDS
PROJECT SUNSHINE, INC. 211 E 43RD ST STE 401 NEW YORK, NY 10017	22-3607512	501 C (3)	13,200.	0.			GENERAL FUNDS
PROJECT YES, INC. DBA YES INSTITUTE - 5275 SUNSET DRIVE -							
MIAMI, FL 33143	65-0646667	501 C (3)	10,172.	0.			GENERAL FUNDS
PROJECTO POR AMOR A JESUS P.O. BOX 531032 MIAMI SHORES, FL 33153	32-0286587	501 C (3)	15,995.	0.			GENERAL FUNDS
PUBLIC COUNSEL 610 S ARDMORE AVE	22 7105140	F01 (2 / 2)	14.000	0.			
LOS ANGELES, CA 90005 PUERTO RICAN BAR ASSOCIATION SCHOLARSHIP FUND, INC 303 PARK AVE. S STE 1405 - NEW YORK, NY	23-7105149	501 C (3)	14,000.	0.			GENERAL FUNDS
10010	06-1016586	501 C (3)	6,120.	0.			GENERAL FUNDS
QUEENS COMMUNITY HOUSE, INC. 10825 62ND DR							
FOREST HILLS, NY 11375	11-2375583	501 C (3)	15,000.	0.			GENERAL FUNDS
R.A.S.G. GREATER MIAMI HEBREW ACADEMY - 2400 PINE TREE DRIVE - MIAMI BEACH, FL 33140	59-0651086	501 C (3)	9,850.	0.			GENERAL FUNDS
RABBI HARRY H EPSTEIN, INC. 335 COLEWOOD WAY NW							
SANDY SPRINGS, GA 30328	58-1164034	501 C (3)	8,840.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINBOW DAYS, INC.							
8150 N CENTRAL EXPWY							
DALLAS, TX 75206	75-1844908	501 C (3)	9,000.	0.			GENERAL FUNDS
RANDALL'S ISLAND PARK ALLIANCE, INC 24 W 61ST ST FL 4 - NEW							
YORK, NY 10023	13-3787630	501 C (3)	10,000.	0.			GENERAL FUNDS
RAVINIA FESTIVAL ASSOCIATION 418 SHERIDAN ROAD							
HIGHLAND PARK, IL 60035	36-6002273	501 C (3)	32,050.	0.			GENERAL FUNDS
DAZON TWO							
RAZOM, INC. 140 2ND AVE. STE 305							
NEW YORK, NY 10003	46-4604398	501 C (3)	100,000.	0.			GENERAL FUNDS
REDLANDS CHRISTIAN MIGRANT							
ASSOCIATION - 402 WEST MAIN STREET							
- IMMOKALEE, FL 34142	59-1221966	501 C (3)	165,901.	0.			GENERAL FUNDS
REGENTS OF THE UNIVERSITY OF							
CALIFORNIA AT BERKELEY - 1995							
UNIVERSITY AVE STE 400 - BERKELEY,							
CA 94704	94-6002123	501 C (3)	35,000.	0.			GENERAL FUNDS
REGIONAL SEMINARY OF ST. VINCENT							
DE PAUL IN FLORIDA, INC 10701 S							
MILITARY TRAIL - BOYNTON BEACH,							
FL 33436	53-0196617	501 C (3)	10,000.	0.			GENERAL FUNDS
RENOWN HEALTH FOUNDATION							
1155 MILL ST 02							
RENO, NV 89502	94-2972749	501 C (3)	10,000.	0.			GENERAL FUNDS
RICHMOND-PERRINE OPTIMIST CLUB,							
INC 18055 HOMESTEAD AVENUE -							
MIAMI, FL 33157	59-2664308	501 C (3)	92,569.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pai T	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIVERSIDE PARK CONSERVANCY, INC. 475 RIVERSIDE DRIVE STE 455 NEW YORK, NY 10115	13-3443825	501 C (3)	12,000.	0.			GENERAL FUNDS
ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS - 515 MADISON AVE STE 718 - NEW YORK, NY	13 3443023	301 C (3)	12,000.				CHALLAND I SADS
10022	13-2522784	501 C (3)	94,000.	0.			GENERAL FUNDS
ROBERT W. WOODRUFF ARTS CENTER, INC 1280 PEACHTREE ST. NE - ATLANTA, GA 30309	58-0633971	501 C (3)	14,000.	0.			GENERAL FUNDS
RONALD MCDONALD HOUSE OF NEW YORK, INC 405 E 73RD ST - NEW YORK, NY 10021	13-2933654	501 C (3)	25,000.	0.			GENERAL FUNDS
ROOT AND REBOUND 1730 FRANKLIN ST. STE 301 OAKLAD, CA 94126	46-3876220		200,000.	0.			GENERAL FUNDS
ROUNDABOUT THEATRE COMPANY, INC. 231 W 39TH STE 1200 NEW YORK, NY 10018	13-6192346	501 C (3)	41,150.	0.			GENERAL FUNDS
RUTH & NORMAN RALES JEWISH FAMILY SERVICE, INC 21300 RUTH & BARON COLEMAN BLVD - BOCA RATON, FL			,				
33428 SALVATION ARMY - MIAMI AREA COMMAND - 1907 N.W. 38TH STREET -	65-1115689		12,000.	0.			GENERAL FUNDS
MIAMI, FL 33142 SAMARITAN DAYTOP FOUNDATION 13802 QUEENS BLVD BRIADWOOD NY 11435	11-2490500		77,906.	0.			GENERAL FUNDS
BRIARWOOD, NY 11435	11-2490500	501 C (3)	7,700.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.)	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANT LA/HAITIAN NEIGHBORHOOD CENTER, - 5000 BISCAYNE BLVD. STE							
110 - MIAMI, FL 33137	65-1080680	501 C (3)	174,170.	0.			GENERAL FUNDS
SARCOMA FOUNDATION OF AMERICA, INC 9899 MAIN ST STE 204 -							
DAMASCUS, MD 20872	52-2275294	501 C (3)	25,000.	0.			GENERAL FUNDS
SAVE FOUNDATION, INC. OF MIAMI-DADE - 4500 BISCAYNE BLVD.							
STE 340 - MIAMI, FL 33137	65-0836881	501 C (3)	10,000.	0.			GENERAL FUNDS
SHAD PROJECT 1934 OLD GALLOWS RD							
TYSONS, VA 22182	84-3731040	501 C (3)	15,000.	0.			GENERAL FUNDS
SHALOM PARK 14800 E BELLEVIEW DR AURORA, CO 80015	74-2376546	501 C (3)	9,000.	0.			GENERAL FUNDS
AUKOKA, CO UUUIS	74 2370340	501 C (5)	3,000.	٠.			GENERAL FUNDS
SILVER OAK JUMPER TOURNAMENT, INC. 10 EDGEWOOD RD							
WESTWOOD, MA 02090	81-4286486	501 C (3)	9,500.	0.			GENERAL FUNDS
SOUL SISTERS LEADERSHIP COLLECTIVE 1951 NW 7TH AVE., #600							
MIAMI, FL 33136	47-3108951	501 C (3)	6,250.	0.			GENERAL FUNDS
SOUTH DADE VETERANS ALLIANCE 14661 HARRISON STREET							
MIAMI, FL 33176	88-1550023	501 C (3)	17,500.	0.			GENERAL FUNDS
SOUTH FLORIDA HINDU TEMPLE 13010 W GRIFFING RD							
SOUTHWEST RANCHES, FL 33330	65-0408497	501 C (3)	8,003.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doı ⊺	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.) T	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH FLORIDA PBS, INC. 3401 S CONGRESS AVE							
BOYNTON BEACH, FL 33426	59-0737868	501 C (3)	60,500.	0.			GENERAL FUNDS
SOUTHWEST SOCIAL SERVICES PROGRAM, INC 25 TAMIAMI BLVD MIAMI,							
FL 33144	59-2102294	501 C (3)	90,660.	0.			GENERAL FUNDS
SPARK YOUTH NYC, INC. 444 MADISON AVE 6 FL	12 2027200	E01 G (2)	12 550	0			GENERAL BUNDS
NEW YORK, NY 10022	13-3037380	501 C (3)	12,550.	0.			GENERAL FUNDS
SPECIAL OLYMPICS FLORIDA, INC. 1915 DON WICKHAM DR							
CLERMONT, FL 34711	23-7181560	501 C (3)	7,000.	0.			GENERAL FUNDS
SPECIAL OLYMPICS NEW JERSEY, INC. 1 EUNICE KENNEDY SHRIVER WAY LAWRECEVILLE, NJ 08648	23-7448729	501 C (3)	18,840.	0.			GENERAL FUNDS
ST. AUGUSTINE CHURCH 1400 MILLER RD			50.400				
CORAL GABLES, FL 33146	53-0196617	501 C (3)	50,123.	0.			GENERAL FUNDS
ST. JUDE CHILDREN'S RESEARCH HOSPITAL, INC 501 SAINT JUDE PL							
- MEMPHIS, TN 38105	35-1044585	501 C (3)	28,897.	0.			GENERAL FUNDS
ST. THOMAS UNIVERSITY 16401 N.W. 37TH AVENUE							
MIAMI GARDENS, FL 33054	59-0949880	501 C (3)	132,500.	0.			GENERAL FUNDS
STREET LAW, INC 1010 WAYNE AVE STE 870							
SILVER SPRINGS, MD 20910	52-2015256	501 C (3)	19,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLOS				. (0 -1-			9-0830840 Pag
Part II Continuation of Grants and Other A	ssistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	eaule i (Form 990), Pa 	π II.) 	Ī
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TALMUDIC COLLEGE OF FLORIDA, INC.							
MIAMI BEACH, FL 33140	59-1571122	501 C (3)	202,500.	0.			GENERAL FUNDS
TEACH FOR AMERICA-MIAMI 3100 NW 5TH AVE 3 FL							
MIAMI, FL 33132	13-3541913	501 C (3)	11,000.	0.			GENERAL FUNDS
TEAM RUBICON 214 MAIN ST. STE 354							
EL SEGUNDO, CA 90254	27-1720480	501 C (3)	15,000.	0.			GENERAL FUNDS
TEAM TEN 4 KIDS, INC. 15502 STONEYBROOK WEST PKWY STE 104							
WINTER GARDEN, FL 34787	82-2880195	501 C (3)	10,013.	0.			GENERAL FUNDS
TEMPLE BETH AM 5950 SW 88TH ST							
MIAMI, FL 33156	13-1663143	501 C (3)	125,115.	0.			GENERAL FUNDS
TEMPLE BETH SHOLOM 4144 CHASE AVENUE							
MIAMI BEACH, FL 33140	59-0714828	501 C (3)	12,811.	0.			GENERAL FUNDS
TEMPLE JUDEA 5500 GRANADA BLVD.							
CORAL GABLES, FL 33146	59-0791048	501 C (3)	5,212.	0.			GENERAL FUNDS
TEMPLE MENORAH 620 75TH STREET							
MIAMI BEACH, FL 33141	59-0737893	501 C (3)	25,270.	0.			GENERAL FUNDS
TEXAS ACCESS TO JUSTICE FOUNDATION P.O. BOX 12886							
AUSTIN, TX 78711	74-2354575	501 C (3)	18,800.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Scho I	edule I (Form 990), Pa T	rt II.) T	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS CHILDREN'S HOSPITAL 6621 FANNIN ST							
HOUSTON, TX 77030	74-1100555	501 C (3)	10,000.	0.			GENERAL FUNDS
TEXAS LYCEUM ASSOCIATION, INC. 3305 STECK AVE STE 200							
AUSTIN, TX 78757	75-1720024	501 C (3)	8,800.	0.			GENERAL FUNDS
TEXAS STATE HISTORY MUSEUM FOUNDATION - PO BOX 12456 -							
AUSTIN, TX 78711	74-2916783	501 C (3)	18,944.	0.			GENERAL FUNDS
TEXAS SUPREME COURT HISTORICAL SOCIETY, INC PO BOX 12673 - AUSTIN, TX 78711	76-0326907	501 C (3)	5,500.	0.			GENERAL FUNDS
AUSTIN, TA 70711	70 0320307	501 C (3)	3,300.	· ·			GENERAL FUNDS
TEXAS WATER FOUNDATION, INC. PO BOX 13252	74 2066067	501 G (2)	0.500				
AUSTIN, TX 78711	74-2866967	501 C (3)	9,580.	0.			GENERAL FUNDS
THE 42ND STREET WORKSHOP, INC. 312 W 36TH ST FL 4							
NEW YORK, NY 10018	13-3763953	501 C (3)	20,000.	0.			GENERAL FUNDS
THE ADMINISTRATORS OF THE TULANE 6823 ST CHARLES AVE							
NEW ORLEANS, LA 70118	72-0423889	501 C (3)	140,000.	0.			GENERAL FUNDS
THE AFYA FOUNDATION OF AMERICA, INC 140 SAW MILL RIVER RD -							
YONKERS, NY 10701	26-1300361	501 C (3)	75,000.	0.			GENERAL FUNDS
THE ALFRED AND ADELE DAVIS ACADEMY 8105 ROBERTS DRIVE							
ATLANTA, GA 30350-4120	58-1970181	501 C (3)	7,600.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE AMERICAN IRELAND FUND							
10 POST OFFICE SQUARE STE 1205							
BOSTON, MA 02109	25-1306992	501 C (3)	14,000.	0.			GENERAL FUNDS
THE ARC OF SOUTH FLORIDA							
P.O. BOX 371333							
MIAMI, FL 33137	59-0839562	501 C (3)	179,408.	0.			GENERAL FUNDS
THE DOLD OF TRUGTERS OF THE							
THE BOARD OF TRUSTEES OF THE							
LELAND - 326 GALVEZ STREET -	04 1156365	E01 G (2)	20.000				GENERAL BUNDA
STANFORD, CA 94305	94-1156365	DUI C (3)	28,000.	0.			GENERAL FUNDS
THE CHILD CENTER OF NY							
118-35 QUEENS BLVD FL 6							
FOREST HILLS, NY 11375	11-1733454	501 C (3)	25,000.	0.			GENERAL FUNDS
THE CLAYCO FOUNDATION							
35 E WACKER DR, STE 1300							
CHICAGO, IL 60601	47-1330583	501 C (3)	9,800.	0.			GENERAL FUNDS
THE COMMITTEE FOR HISPANIC	47 1330303	501 € (5)	3,000.	٠.			GENERAL FUNDS
CHILDREN AND FAMILIES - 110							
WILLIAM ST STE 1802 - NEW YORK, NY							
10036	11-2622003	501 C (3)	46,250.	0.			GENERAL FUNDS
THE COMMUNITY FOUNDATION FOR			,				
GREATER ATLANTA, INC 191							
PEACHTREE ST NE STE 1000 -							
ATLANTA, GA 30303	58-1344646	501 C (3)	50,000.	0.			GENERAL FUNDS
THE CORAL GABLES COMMUNITY							
FOUNDATION - 220 ALHAMBRA CIR STE	CE 0000000	E01 G (2)	15 005	_			
320 - CORAL GABLES, FL 33134	65-0208290	DUI C (3)	15,985.	0.			GENERAL FUNDS
THE EDUCATION FUND							
6713 MAIN ST STE 240							
MIAMI LAKES, FL 33014	59-2468114	501 C (3)	100,401.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO				- 40.1	(5		59-0830840 Pa
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	rt II.) T	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE EVERGLADES FOUNDATION, INC. 18001 OLD CUTLER RD STE 625							
PALMETTO BAY, FL 33157	59-3228899	501 C (3)	27,500.	0.			GENERAL FUNDS
THE FAMILY CHRISTIAN ASSOCIATION OF AMERICA, INC 14701 N.W. 7TH							
AVENUE - MIAMI, FL 33168-3103	59-2371125	501 C (3)	136,727.	0.			GENERAL FUNDS
THE FLORIDA BAR FOUNDATION 875 CONCOURSE PKWY S STE 195							
MAITLAND, FL 32751	59-1004604	501 C (3)	5,288.	0.			GENERAL FUNDS
THE GEORGE WASHINGTON UNIVERSITY 2033 K ST NW STE 300							
WASHINGTON, DC 20052	53-0196584	501 C (3)	9,600.	0.			GENERAL FUNDS
THE HOME FOR LITTLE WANDERES, INC.							
BOSTON, MA 02115	04-2104764	501 C (3)	7,500.	0.			GENERAL FUNDS
THE INNER CIRCLE, INC. P.O. BOX 5372							
NEW YORK, NY 10185	13-3360989	501 C (3)	12,000.	0.			GENERAL FUNDS
THE JEROME BETTIS BUS STOPS HERE FOUNDATION - 15700 W TEN MILES RD							
STE 102 - SOUTHFIELD, MI 48075	38-3378049	501 C (3)	16,000.	0.			GENERAL FUNDS
THE JEWISH THEOLOGICAL SEMINARY OF AMERICA - 3080 BROADWAY AVE - NEW							
YORK, NY 10027	13-0887640	501 C (3)	24,625.	0.			GENERAL FUNDS
THE JULIANA GREENFIELD FAMILY FOUNDATION - 300 E RANDOLPH ST -							
CHICAGO, IL 60601	83-3830498	501 C (3)	150,000.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Pag
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho I	edule I (Form 990), Pai I	rt II.) T	I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LEADNING EXPEDIENCE COURSE							
THE LEARNING EXPERIENCE SCHOOL, INC 5651 SW 82ND AVENUE RD -							
MIAMI, FL 33143	59-1913861	501 C (3)	10,963.	0.			GENERAL FUNDS
MIAMI, FB 33143	33 1313001	501 C (5)	10,503.	· ·			GENERAL FUNDS
THE LEUKEMIA & LYMPHOMA SOCIETY							
200 SOUTH PARK RD STE 140							
HOLLYWOOD, FL 33021	13-5644916	501 C (3)	15,000.	0.			GENERAL FUNDS
THE MELISSA INSTITUTE FOR VIOLENCE			,				
PREVENTION AND TREATMENT, - 1507							
LEVANTE AVE STE 331 - CORAL							
GABLES, FL 33146	65-0683088	501 C (3)	8,161.	0.			GENERAL FUNDS
THE MIAMI FOUNDATION							
40 NW 3RD STREET STE 305							
MIAMI, FL 33128	65-0350357	501 C (3)	87,360.	0.			GENERAL FUNDS
MUH DUTLITD AND DAMPTOTA BROOM							
THE PHILLIP AND PATRICIA FROST MUSEUM OF SCIENCE - 1101 BISCAYNE							
BLVD - MIAMI, FL 33132	59-0854960	501 C (3)	22,500.	0.			GENERAL FUNDS
BHVD MIMH, 1H 33132	33 0034300	301 C (3)	22,300.	· ·			CHNERTE TONDO
THE SUPREME COURT HISTORICAL							
SOCIETY - 224 E CAPITOL ST, NE -							
WASHINGTON, DC 20003	23-7420574	501 C (3)	22,750.	0.			GENERAL FUNDS
·							
THEATRE UNDER THE STARS, INC.							
800 BAGBY STE 200							
HOUSTON, TX 77002	74-1621647	501 C (3)	10,000.	0.			GENERAL FUNDS
TORAS EMES ACADEMY OF MIAMI, INC.							
1025 NE MIAMI GARDENS DR.		504 5 (0)		_			
NORTH MIAMI BEACH, FL 33179	59-1870702	501 C (3)	10,000.	0.			GENERAL FUNDS
MDIICMEEC OF COLUMNEY INTUEDATES							
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 113TH ST MC 4524							
NEW YORK, NY 10025	13-5598093	501 C (3)	79,600.	0.			GENERAL FUNDS
15AR, HI 10025	1 13 3370093	201 6 (3)	15,000.	l "•		I .	

S G MOLIN						9-0830840 Page
Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
51-0172429	501 C (3)	107,250.	0.			GENERAL FUNDS
59-1523943	501 C (3)	517 400	0			GENERAL FUNDS
59-0624404	501 C (3)	25,000.	0.			GENERAL FUNDS
59-0967823	501 C (3)	25 200.	0.			GENERAL FUNDS
		21,600.	0.			GENERAL FUNDS
52-0591543	501 C (3)	100,000.	0.			GENERAL FUNDS
04-2382233	501 C (3)	7,500.	0.			GENERAL FUNDS
			0.			GENERAL FUNDS
						GENERAL FUNDS
	51-0172429 59-1523943 59-0624404 59-0967823 52-1309391 52-0591543 04-2382233	(b) EIN (c) IRC section	Assistance to Domestic Organizations and Domestic Go (b) EIN (c) IRC section if applicable (d) Amount of cash grant 51-0172429 501 c (3) 107,250. 59-1523943 501 c (3) 517,400. 59-0624404 501 c (3) 25,000. 59-0967823 501 c (3) 25,200. 52-1309391 501 c (3) 21,600. 52-0591543 501 c (3) 100,000. 04-2382233 501 c (3) 7,500. 13-2617681 501 c (3) 22,600.	Sesistance to Domestic Organizations and Domestic Governments (Sch. (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (f) Amount of cash grant (h) EIN (f) EIN	Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part (Gash grant) (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 51-0172429 501 c (3) 107,250. 0. 59-0524404 501 c (3) 25,000. 0. 59-0624404 501 c (3) 25,200. 0. 52-1309391 501 c (3) 21,600. 0. 52-0591543 501 c (3) 100,000. 0. 04-2382233 501 c (3) 7,500. 0. 13-2617681 501 c (3) 22,600. 0.	Sesistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (b) EIN

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITY ON THE BAY 411 NE 21ST ST							
MIAMI, FL 33137-5113	59-0816468	501 C (3)	8,249.	0.			GENERAL FUNDS
UNIVERSITY OF CALIFORNIA IRVINE FOUNDATION - 100 THEORY STE 250 -							
IRVINE, CA 92697	95-2540117	501 C (3)	10,000.	0.			GENERAL FUNDS
UNIVERSITY OF MIAMI CONTROLLERS OFFICE P.O. BOX 025405							
MIAMI, FL 33102-5405	59-0624458	501 C (3)	751,078.	0.			GENERAL FUNDS
UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK CAMPUS CITIGROUP CENTER - LOS ANGELES, CA							
90089-8201	95-1642394	501 C (3)	12,000.	0.			GENERAL FUNDS
URBAN ASSEMBLY, INC. 90 BROAD ST STE 2101 NEW YORK, NY 10004	11-0332039	501 C (3)	99,000.	0.			GENERAL FUNDS
URBAN LEAGUE OF GREATER MIAMI, INC 8500 NW 25TH AVE - MIAMI, FL 33147	59-0699445	501 C (3)	187,073.	0.			GENERAL FUNDS
FH 33147	22 0022442	301 C (37	107,073.	· ·			GENERAL FUNDS
VAN ALEN INSTITUTE PROJECTS IN PUBLIC ARCHITECTURE - 30 W 22ND ST							
FL 4 - NEW YORK, NY 10010	13-1655152	501 C (3)	25,000.	0.			GENERAL FUNDS
VENTURE FOR AMERICA, INC. 307 7TH AVENUE SUITE 1201							
NEW YORK, NY 10001	27-2987904	501 C (3)	25,000.	0.			GENERAL FUNDS
VISIONS SERVICES FOR THE BLIND AND VISUALLY IMPAIRED - 500 GREENWICH							
ST STE 302 - NEW YORK, NY 10013	13-1624210	501 C (3)	10,500.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO	S G MOLIN	A				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VISUAL COMMUNICATION MEDIA 120 JUDGE JOHN AISO ST LOS ANGELES, CA 90012	23-7108393	501 C (3)	10,840.	0.			GENERAL FUNDS
VOICES FOR CHILDREN FOUNDATION, INC 601 NW 1ST CT FL 10 - MIAMI, FL 33136	59-2746076	501 C (3)	13,158.	0.			GENERAL FUNDS
VOLUNTEER LAWYERS FOR THE ARTS, INC 1 E 53RD ST FL 6 - NEW YORK, NY 10022	13-2936291	501 C (3)	10,000.	0.			GENERAL FUNDS
VOLUNTEERS OF LEGAL SERVICE, INC. 40 WORTH ST STE 820 NEW YORK, NY 10013	13-3234630	501 C (3)	8,600.	0.			GENERAL FUNDS
WANTON INJUSTICE LEGAL DETAIL 80 S 8TH ST STE 2200 MINNEAPOLIS, MN 55402	86-3213536	501 C (3)	10,000.	0.			GENERAL FUNDS
WECOUNT!, INC. 201 N KROME AVE STE 230-250 HOMESTEAD, FL 33030	56-2638368	501 C (3)	17,500.	0.			GENERAL FUNDS
WENDY HILLIARD FOUNDATION 550 W 155TH ST NEW YORK, NY 10032	13-3879321	501 C (3)	6,000.	0.			GENERAL FUNDS
WGBH EDUCATIONAL FOUNDATION 1 GUEST ST BOSTON, MA 02135	04-2104397	501 C (3)	20,000.	0.			GENERAL FUNDS
WINGS FOR LIFE USA - SPINAL CORD RESEARCH FOUNDATION, INC 1630 STEWART ST - SANTA MONICA, CA 90404	81-4795399	501 C (3)	7,800.	0.			GENERAL FUNDS

Schedule I (Form 990) C/O CARLO							9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pai	t II.)	Г
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN FOR WOMEN INTERNATIONAL 2000 M ST, NW STE 200 WASHINGTON, DC 20036	52-1838756	501 C (3)	75,000.	0.			GENERAL FUNDS
WOMEN IN NEED, INC. 115 W 31ST ST NEW YORK, NY 10001	13-3164477	501 C (3)	14,200.	0.			GENERAL FUNDS
WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORPORATION - 50 E 168TH ST BRONX, NY 10452	11-3099604		9,280.	0.			GENERAL FUNDS
WORLD WIDE SCHOLOASTIC ESPORTS FOUNDATION - 1428 TUGALOO DR NE - BROOKHAVEN, GA 30319	85-3869024		10,000.	0.			GENERAL FUNDS
YESHIVA ELEMENTARY, INC. 7902 CARLYLE AVE MIAMI BEACH, FL 33141	65-0063045	501 C (3)	10,000.	0.			GENERAL FUNDS
YJP FOUNDATION, INC 107 E 16TH ST NEW YORK, NY 10003	37-1900742	501 C (3)	7,500.	0.			GENERAL FUNDS
YMCA OF SOUTH FLORIDA 730 NW 107 AVENUE STE 200 MIAMI, FL 33172	59-0624464	501 C (3)	44,929.	0.			GENERAL FUNDS
YOUNG ISRAEL OF GREATER MIAMI 990 NE 171ST ST NORTH MIAMI BEACH, FL 33162	59-6033985	501 C (3)	10,000.	0.			GENERAL FUNDS
YOUNG MUSICIANS ORGANIZATION, INC 1260 SW 29TH ST STE 103 MIAMI, FL 33142	46-2610764	501 C (3)	7,869.	0.			GENERAL FUNDS

,	S G MOLIN				adula I (Farm 000) Da		9-0830840 Pa
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUTH CO-OP, INC. 5040 NW 7 STREET, SUITE 300 MAMI, FL 33126	23-7320351	501 C (3)	165,131.	0.			GENERAL FUNDS
COUTH RENEWAL FUND 1460 BROADWAY NEW YORK, NY 10036	13-3641489	501 C (3)	53,000.	0.			GENERAL FUNDS
WCA SOUTH FLORIDA, INC. 851 NW 5TH ST MAMI, FL 33128-1615	59-0624450	501 C (3)	241,893.	0.			GENERAL FUNDS
WPA PTSA 150 SW 1ST STREET MAMI, FL 33130	87-0783789	501 C (3)	12,781.	0.			GENERAL FUNDS
COO MIAMI FOUNDATION, INC. 12400 SW 152ND ST MIAMI, FL 33177	59-6192814	501 C (3)	15,000.	0.			GENERAL FUNDS
LINCOLN CENTER FOR THE PERFORMING ARTS, INC 70 LINCOLN CENTER PLAZA 9TH FLOOR - NEW YORK, NY	13-1847137		22,000.	0.			GENERAL FUNDS
MOUNT ST. MICHAEL ACADEMY 1300 MURDOCK AVE BRONX, NY 10466	13-1740475		10,000.	0.			GENERAL FUNDS

59-0830840

C/O CARLOS G MOLINA

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
NDIVIDUAL GRANTS	5	49,275.	0.		
Part IV Supplemental Information. Provide the information	l required in Part I, lin	e 2; Part III, column	(b); and any other ac	 dditional information.	
PART I, LINE 2:					
THE FUNDS ARE MONITORED BY THE CO	MMUNITY IM	PACT GROUE	AND A COM	MITTEE OF	
VOLUNTEERS THAT REVIEW THE PROGRA	MMATIC DEL	IVERABLES	AND ALSO T	HE FISCAL	
HEALTH OF THE ORGANIZATION.					
_					

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

ı İ

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA

Employer identification number 59-0830840

			Yes	No
1 a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
		1b		
2				
		2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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:			
а	Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the 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. Independent compensation committee Independent compensation consultant Ormpensation committee Compensation survey or study Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: Receive a severance payment from a supplemental nonqualified retirement plan? Participate in or receive payment from a supplemental nonqualified retirement plan? Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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: The organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organi			X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	-	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
		7		X
8				
		8		X
9				
	Regulations section 53 4958-6(c)?	a		l

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

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MARIA ALONSO	(i)	349,170.	0.	23,913.	23,850.	8,116.	405,049.	0.
FORMER PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CARLOS G. MOLINA	(i)	197,477.	0.	13,450.	18,451.	11,405.	240,783.	0.
CHIEF FINANCIAL & ADMINISTRATIVE OFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARY DONWORTH	(i)	177,601.	0.	13,800.	17,222.	7,036.	215,659.	0.
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CRISTINA BLANCO	(i)	173,511.	0.	5,391.	10,572.	7,011.	196,485.	0.
CHIEF COMMUNICATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) NORIE DEL VALLE	(i)	168,712.	0.	8,415.	10,490.	6,981.	194,598.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CELIO ROMANACH	(i)	157,480.	0.	7,581.	9,472.	2,677.	177,210.	0.
CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990.

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

2021
Open to Public Inspection

Name of the organization

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA

Employer identification number 59-0830840

C/O CARDOD G MODINA	001100	TC / 3 \ 23TD	(11)	1037EE T 3	TTT3 III T O 3.7.0		<u> </u>	, 0	030	7 = 0		
	R COLUMN	· , ,			UATIONS							
(a) Issuer name (b) Issuer EIN (c)	c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Descripti	on of purpose	(g) Def	eased			(i) Po	
									of is:		finan	<u> </u>
							Yes	No	Yes	No	Yes	No
MIAMI DADE COUNTY					MIAMI DA							
A INDUSTRIAL DEVELOPMENT A 59-1662816 I	NONE	12/12/12	1541	<u>5000.</u>	INDUSTRI	AL DEVELO		X		X		<u>X</u>
В												
С												
D												
Part II Proceeds				ı								
		Α.			В	С			D			
1 Amount of bonds retired												
2 Amount of bonds legally defeased	 15,41!											
3 Total proceeds of issue	Total proceeds of issue											
4 Gross proceeds in reserve funds	Gross proceeds in reserve funds											
5 Capitalized interest from proceeds												
6 Proceeds in refunding escrows												
7 Issuance costs from proceeds		238	3,090.									
8 Credit enhancement from proceeds												
9 Working capital expenditures from proceeds												
10 Capital expenditures from proceeds												
11 Other spent proceeds												
12 Other unspent proceeds												
13 Year of substantial completion		20)12									
		Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds	s (or,											
if issued prior to 2018, a current refunding issue)?		X										
15 Were the bonds issued as part of a refunding issue of taxable bonds (or	, if											
issued prior to 2018, an advance refunding issue)?			X									
16 Has the final allocation of proceeds been made?		X								\perp		
17 Does the organization maintain adequate books and records to support	the											
final allocation of proceeds?		X										
I HΔ For Panerwork Reduction Act Notice see the Instructions for Form	990							Scha	dula K	(Form	aan)	2021

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

Par	t III Private Business Use								
			A		3	(С)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X						
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities		•		'				
-	other than a section 501(c)(3) organization or a state or local government		%		%		%	i	%
5	Enter the percentage of financed property used in a private business use as a		,,,		,,		,,,		,,
•	result of unrelated trade or business activity carried on by your organization,							i	
	another section 501(c)(3) organization, or a state or local government		%		%		%	i	%
6	Total of lines 4 and 5	%			%	%			
7			X		, ,		, , , , , , , , , , , , , , , , , , ,		<u>%</u>
	Has there been a sale or disposition of any of the bond-financed property to a non-								
Ju	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
	If "Yes" to line 8a, enter the percentage of bond-financed property sold or				1		-		
-	disposed of		%		%		%	i	%
	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations		1		, ,		, , , , , , , , , , , , , , , , , , ,		1
·	sections 1.141-12 and 1.145-2?								
9									
Ū	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?		X						
Par	t IV Arbitrage				1				
					3		С	Г)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?		•		'				
	Rebate not due yet?		Х						
	Exception to rebate?		Х						
	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was				<u>'</u>				1
	performed								
3	Is the bond issue a variable rate issue?	X							
_ <u> </u>									

Part IV Arbitrage (continued)

		A		3		C	Г	<u> </u>		
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No		
hedge with respect to the bond issue?		Х								
b Name of provider		•				•				
c Term of hedge										
d Was the hedge superintegrated?										
e Was the hedge terminated?										
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х								
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
6 Were any gross proceeds invested beyond an available temporary period?		X								
7 Has the organization established written procedures to monitor the										
requirements of section 148?		X								
Part V Procedures To Undertake Corrective Action										
		A	I	3		C	D			
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No		
of federal tax requirements are timely identified and corrected through the										
voluntary closing agreement program if self-remediation isn't available under										
applicable regulations?										
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.										
SCHEDULE K, PART I, BOND ISSUES:										
(A) ISSUER NAME: MIAMI DADE COUNTY INDUSTRIAL DEV			ORITY							
(F) DESCRIPTION OF PURPOSE: MIAMI DADE INDUSTRIAL	DEVEL	OPMENT								
SCHEDULE K, PART II										
REFINANCING DEBT INCLUDING A SWAP AGREEMENT WITH										
IN DECEMBER 2012, UNITED WAY EXECUTED A REFINANCI										
UNITED, ("BONDHOLDER") AND THE MIAMI-DADE COUNTY				ENT						
AUTHORITY IN CONJUNCTION WITH THE ISSUANCE OF THE										
REFUNDING BONDS, PAR VALUES TOTALING \$15,415,000.										
BONDHOLDER LOAN AGREEMENT, UNITED WAY USED BOND P				HE						
THEN OUTSTANDING PRINCIPAL BALANCE, 13,615,000, C	F THE	ISSUER	LOAN.	N						
CONNECTION WITH THE TRANSACTION, UNITED WAY INCUR	RED BOI	ND COST	S OF							
\$238,090 OF WHICH \$165,783 WAS CAPITALIZED AS LOA										
AMORTIZED UNDER THE STRAIGHT LINE METHOD OVER THE			BONDS.	AS						
OF JUNE 30, 2019, THE REMAINING UNAMORTIZED LOAN	COSTS I	WAS								
INSIGNIFICANT. THE EFFECTIVE INTEREST RATE OF THE	NEW D	EBT WIT	H BANK							
UNITED IS 2.32% PER ANNUM.										
EFFECTIVE DECEMBER 12, 2017, THE BONDHOLDER LOAN	WAS AM	ENDED T	O MODII	Ϋ́						

Schedule K (Form 990) 2021 C/O CARLOS G MOLINA	59-0830840	Page -
Part VI Supplemental Information. Provide additional information for responses to quest	ions on Schedule K. See instructions. (continued)	
CERTAIN FINANCIAL COVENANTS AND THE EFFECTIVE I	NTEREST RATE TO 2.54%,	
ALONG WITH EXTENDING THE MATURITY DATE THROUGH	DECEMBER 2032.	
EFFECTIVE JANUARY 1, 2018, THE NEW TAX REFORM T		
INTEREST RATES OF ESTABLISHED TAX-EXEMPT BANK-O		
INCREASE TO CORPORATE DEBT INTEREST RATE DUE TO	THE DECREASE IN THE	
MARGINAL CORPORATE INCOME TAX RATE FROM 39% TO		
IMPLEMENT THE RATE CHANGE COULD CAUSE THE BONDS		
MAY 2018, THE ORGANIZATION ENTERED INTO AN INTE		
WITH BANK UNITED FOR AN INTEREST RATE ADJUSTMEN		
CHANGE. THE INTEREST RATE ADJUSTMENT WOULD RESU		
THE INTEREST RATE TO 3.08%. THE INTEREST START		
2018, WITH THE FIRST PAYMENT DUE ON JULY 12, 20	18.	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA

Employer identification number 59-0830840

Par	t 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 det noncash contribut	•	s
1	Art - Works of art						
	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						
	Intellectual property						
9	Securities - Publicly traded	X	6,438	1,678,959.	FMV		
10	Securities - Closely held stock						
	Securities - Partnership, LLC, or trust interests						
12	Securities - Miscellaneous						
	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
	Food inventory						
	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (AIRFARE MILES)	X	1	187,000.	FMV		
26	Other						
27	Other						
	Other ()						
	Number of Forms 8283 received by the organiz						
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29		1	
					ſ	Yes	No
	During the year, did the organization receive by						
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	sed for		
	exempt purposes for the entire holding period?	?				30a	X
	If "Yes," describe the arrangement in Part II.					77	
	Does the organization have a gift acceptance p	-	•	•	ions?	31 X	
	Does the organization hire or use third parties of contributions?		•	cit, process, or sell noncash		32a	х
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

UNITED WAY MIAMI INC.

Schedule M	(Form 990) 2021	C/0	CARL	OS G	MOLINA				59-08308	40 Page	e 2
Part II	(Form 990) 2021 Supplemental is reporting in Part this part for any ac	l Inforr t I, colum	nation. nn (b), the	Provide number	the information of contribution	required by F s, the number	Part I, lines 30b, of items received	32b, and 33, a ed, or a combi	and whether the or nation of both. Als	rganization o complete	
	•										

Schedule M (Form 990) 2021

132142 11-17-21

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

UNITED WAY MIAMI INC. C/O CARLOS G MOLINA

Employer identification number 59-0830840

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COALITIONS TO INCREASE THE PER-CHILD RATE AND ENSURE VPK INSTRUCTORS

MAKE AT LEAST \$15/HOUR. COMPLETED THIRD YEAR OF FIVE-YEAR \$22.5 MILLION

FEDERAL EARLY HEAD START-CHILD CARE PARTNERSHIP GRANT, REACHING 683

INFANTS AND TODDLERS IN UNDER-RESOURCED AREAS OF OUR COMMUNITY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

COST ASSISTANCE TO ALICE WORKERS. UNITED WAY WAS SUCCESSFUL IN

ADVOCATING INCLUDING THE EARLY LEARNING EDUCATORS IN THIS PROGRAM.

PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: TWO-HOUR TRAINING SESSIONS; A TRAINING VOUCHER FOR A 12-HOUR FOLLOW-UP PROVIDED TO ORGANIZATIONS WHO COMPLETED THE FOUR TRAINING SESSIONS; AND PEER GATHERINGS WITH PARTICIPANTS FROM THE TRAINING SERIES TO FOSTER CONTINUED DISCUSSIONS ON THE TOPIC. A COVID-19 VACCINATION INITIATIVE WAS LAUNCHED THROUGH A GRANT FROM OCEAN REEF COMMUNITY FOUNDATION FOCUSED ON THE SOUTH DADE COMMUNITIES OF HOMESTEAD AND FLORIDA CITY WHERE LESS THAN 40% OF THOSE AGED 16 AND OLDER WERE VACCINATED. AS PART INITIATIVE, UNITED WAY MIAMI PARTNERED WITH KEY NONPROFITS AND FAITH-BASED INSTITUTIONS TO CONDUCT OUTREACH ACTIVITIES TO INFORM EDUCATE AND DISPEL MYTHS ABOUT THE VACCINE. OTHER PARTNERS INCLUDED WHICH PROVIDED FREE TRANSPORTATION TO AND FROM VACCINATIONS SITES: UNIVERSITY OF MIAMI, MIAMI-DADE COUNTY AND THE HEALTH FOUNDATION OF SOUTH FLORIDA. CO-LED THE MIAMI-DADE AGE FRIENDLY INITIATIVE RESULTING IN SUSTAINABILITY OF COLLABORATION AND COORDINATION AMONG EIGHT MAJOR PARTNERS COMMITTED TO MAKE MIAMI-DADE MORE AGE FRIENDLY (AS

132211 11-11-21

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

OF THE BOARD, REVIEWS THE COMPARABLE DATA GATHERED BY STAFF WITH RESPECT TO

Schedule O (Form 990) 2021	Page 2
Name of the organization UNITED WAY MIAMI INC. C/O CARLOS G MOLINA	Employer identification number 59-0830840
CEO AND OFFICERS. THE COMMITTEE PRESENTS THEIR FINDINGS AND	D RECOMMENDATIONS
TO THE BOARD.	
FORM 990, PART VI, SECTION C, LINE 19:	
PROCESS GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBL	IC. THE
ORGANIZATION MAKES AVAILABLE THE FORM 990, THE FINANCIAL S	TATEMENTS AND
THEIR FEDERAL AND FLORIDA EXEMPTION CERTIFICATIONS THROUGH	THEIR WEBSITE.
THE FOLLOWING DOCUMENTS ARE AVAILABLE UPON REQUEST: GOVERN	ING DOCUMENTS AND
CONFLICT OF INTEREST POLICY.	
FORM 990, PART XII, QUESTION 2C	
ORGANIZATION'S FINANCIAL STATEMENTS AND REPORTING. THE ORG	ANIZATION'S
FINANCIAL STATEMENTS FOR THE FISCAL YEAR ENDED 6/30/2022 W	ERE AUDITED
ON A CONSOLIDATED BASIS. IN ADDITION, THE ORGANIZATION HAS	AN AUDIT
SUB-COMMITTEE THAT OVERSEES THE AUDIT PROCESS AND ASSUMES	
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL	STATEMENTS
AND SELECTION OF THE INDEPENDENT ACCOUNTANT.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization UNITED WAY MIAMI INC.

C/O CARLOS G MOLINA

Employer identification number 59-0830840

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
CENTER FOR EXCELLENCE LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	CHILDREN PROGRAM	FLORIDA			UNITED WAY
CHILDREN'S ADVOCACY COMPLEX LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	PARKING	FLORIDA			UNITED WAY
3250 REAL ESTATE HOLDINGS LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	PROPERTY MAIN	FLORIDA			UNITED WAY
UNITED WAY REAL PROPERTY HOLDINGS LLC -					
59-0830840, 3250 SW 3RD AVENUE, MIAMI, FL					
33129	FUNDRAISING	FLORIDA			UNITED WAY

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	(g) on 512(b)(13) ontrolled entity?	
				501(c)(3))		Yes	No	

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

Part I	Continuation of Identification of Disregarded Entities
--------	--

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
START KIDS BRIGHT - 26-3838618					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	CHARITABLE	FLORIDA			UNITED WAY
3107 CORAL WAY LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	PARKING	FLORIDA			UNITED WAY
3125 CORAL WAY LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	PROPERTY MANAGEMENT	FLORIDA			UNITED WAY
3195 CORAL WAY LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	REAL ESTATE	FLORIDA			UNITED WAY

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		, , ,	1				_		1	_	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	Percenta
of related organization		(state or foreign	entity	(related, unrelated, lexcluded from tax under	income	end-of-year assets	alloca	ıtions?	amount in box	partn	Percenta ing ownersh
		country)		Predominant income (related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes	No
-											
										+	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country)		,				Yes	No
-									
-									-
-									

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

1b

Yes No

Schedule R (Form 990) 2021

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)				1c	
d Loans or loan guarantees to or for related organization(s)				1d	
e Loans or loan guarantees by related organization(s)				1e	
f Dividends from related organization(s)				1f	
g Sale of assets to related organization(s)				1g	
h Purchase of assets from related organization(s)				1h	
i Exchange of assets with related organization(s)				1i	
j Lease of facilities, equipment, or other assets to related organization(s)				1j	
				41	
k Lease of facilities, equipment, or other assets from related organization(s)				1k	
Performance of services or membership or fundraising solicitations for relat				11	
m Performance of services or membership or fundraising solicitations by relat				1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related or				1n	
Sharing of paid employees with related organization(s)				10	
p Reimbursement paid to related organization(s) for expenses				1p	-
q Reimbursement paid by related organization(s) for expenses				1q	
				1r	
s Other transfer of cash or property from related organization(s)				1s	
2 If the answer to any of the above is "Yes," see the instructions for information	ion on who must complete th	is line, including covered relati	onships and transaction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved	
(1)					
(2)					
(3)					
4)					
(5)					
<u>u</u>					
(6)					
132163 11-17-21	100		Schedule	R (Form 9	990) 2021

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership

Part VII	Supplemental Information
	Provide additional information for responses to questions on Schedule R. See instructions.