# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

and ending JUN 30, 2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning

Go to www.irs.gov/Form990 for instructions and the latest information. 2022

JUL 1,

Open to Public Inspection

В	Check if applicable	C Name of organization		D Employer identific	cation number
Г	Addres	UNITED WAY MIAMI INC.			
F	change			59-08308	40
F	Initial return		Room/suite	E Telephone number	
F	Final	22E0 CM 2DD AVENUE	110011/3uito	305-860-	
	return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	105,739,358.
Г	Ameno	MIAMI, FL 33129		H(a) Is this a group re	
F	Application	F Name and address of principal officer: CARLOS G. MOLINA		for subordinates	
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	
$\overline{}$	Tax-exe	mpt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) (	or 527	1	list. See instructions
	Websit			H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year		1 State of legal domicile: ${f FL}$
	art I	Summary	•	•	
_	1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$ .	MISSIO	N OF UNITED	WAY MIAMI
Activities & Governance		IS BUILDING TTHE COMMUNITY BY HELPING PEO	OPLE C	ARE FOR ONE	ANOTHER.
rns	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	41
ত	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	33
es	5	Fotal number of individuals employed in calendar year 2022 (Part V, line 2a)		5	282
ΞĒ	6	Fotal number of volunteers (estimate if necessary)		6	5000
Act	7 a			7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
				Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		50,414,009.	53,217,152.
Revenue		Program service revenue (Part VIII, line 2g)		763,311.	969,462.
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,073,485.	13,263,581.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		862,083.	807,655.
_		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		55,112,888. 30,602,094.	68,257,850. 35,041,442.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	
	I	Benefits paid to or for members (Part IX, column (A), line 4)		14,780,376.	0. 14,991,605.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  Professional fundraising fees (Part IX, column (A), line 11e)  Fotal fundraising expenses (Part IX, column (D), line 25)  3,515,5	27	0.	· ·
Ĕ	170	Other expenses (Part IX, column (D), line 25)		8,443,094.	9,554,910.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)  Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		53,825,564.	59,587,957.
		Revenue less expenses. Subtract line 18 from line 12		1,287,324.	8,669,893.
og og	3	teveride less expenses. Subtract line 10 from line 12		ginning of Current Year	End of Year
Net Assets	20	Fotal assets (Part X, line 16)			150,533,408.
Ass	21	Fotal liabilities (Part X, line 26)		66,590,114.	66,571,511.
Est	22	Net assets or fund balances. Subtract line 21 from line 20		80,301,767.	83,961,897.
	art II	Signature Block			
Un	der pena	ties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	/ knowledge and belief, it is
true	e, correc	, and complete. Declaration of preparer (other than officer) is based on all information of wh	hich preparer	has any knowledge.	
		***************************************			
Sig		Signature of officer		Date	
He	re	CARLOS G. MOLINA, CFO			
		Type or print name and title		Noto I -	T DTIN
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai		ISRAEL J. GOMEZ ISRAEL J. GOMEZ	1 2	2/15/23 if self-employe	P00846353
	parer	Firm's name KEEFE, MCCULLOUGH & CO., LLP, C.1		Firm's EIN 5	9-1363792
US	e Only	Firm's address 6550 N FEDERAL HIGHWAY, SUITE 4:	ΤO	D 0F	1 771 000 <i>6</i>
_		FT. LAUDERDALE, FL 33308		Phone no. 95	4-771-0896
Ma	y the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

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rai	Check if Schedule O contains a response or note to any line in this Part III
1	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.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$17,527,900 •including grants of \$5,840,217 •) (Revenue \$\$
	HOW WE IMPACTED EARLY EDUCATION:
	-TRAINED 796 EDUCATORS
	-PROVIDED 6,318 HOURS OF PROFESSIONAL LEARNING TO EDUCATORS
	-SERVED 7,176 CHILDREN IN 121 PROGRAMS
	HOW WE IMPACTED SCHOOL-AGE EDUCATION:
	-4,676 STUDENTS WITH HOMEWORK ASSISTANCE AND/OR TUTORING
	-1,779 STUDENTS WITH CONDUCT AND BEHAVIOR INTERVENTIONS TO IMPROVE
	SCHOOL ENGAGEMENT.
	-1,030 STUDENTS WITH POST-SECONDARY PREP AND SUPPORT
4b	(Code: ) (Expenses \$ 4,369,856 • including grants of \$ 3,378,111 • ) (Revenue \$
	HOW WE IMPACTED HEALTH AND WELLNESS:
	-MORE THAN 21,183 PEOPLE ACCESSED CARE FOR THEIR PHYSICAL, MENTAL, AND
	EMOTIONAL HEALTH NEEDS.
	-MORE THAN 1,523 CHILDREN PARTICIPATED IN HEALTHY EATING, FITNESS, AND
	PLAY ACTIVITIES.
	-MORE THAN 8,989 OLDER ADULTS RECEIVED ASSISTANCE TO REMAIN HEALTHY AND
	ACTIVE.
	1011111
	(a) 1 724 200 \ (a) 1 724 200 \ (b) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4C	(Code:) (Expenses \$ 2,959,528 • including grants of \$) (Revenue \$) HOW WE IMPACTED FINANCIAL STABILITY:
	-4,899 UNEMPLOYED AND UNDEREMPLOYED INDIVIDUALS PARTICIPATED IN
	TRAINING AND PLACEMENT PROGRAMS.
	-8,353 INDIVIDUALS LEARNED BUDGETING, MONEY MANAGEMENT SKILLS, AND
	-
	STRATEGIES FOR SAVING MONEY.
	-15,657 INDIVIDUALS RECEIVED SHELTER AND/OR ASSISTANCE.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 25,965,736 • including grants of \$ 24,098,914 •) (Revenue \$ 447,409 •)
40	Total program service expanses $50.823.020$ .

#### 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	4	Х	
5	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-	-25	
3	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 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,	_		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> .  Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	7		
8	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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,	446	Х	
h	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	21	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	1115		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		х
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			l
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	<del>                                     </del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		X
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<del></del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

## 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		Х					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current								
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete								
	Schedule J	23	X						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the								
	last day of the year, that was issued after December 31, 2002? 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		Х					
	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					
d	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								
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х					
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		х					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200							
20	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		х					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20							
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled								
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х					
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,								
20									
_	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	00-		Х					
	"Yes," complete Schedule L, Part IV	28a		X					
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b							
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	00-		Х					
	"Yes," complete Schedule L, Part IV	28c	X	Λ					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v					
	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							
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7,7					
	Schedule N, Part II	32		X					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		37						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х						
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			٦,					
	Part V, line 1	34	v	X					
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х						
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			17					
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			17					
	If "Yes," complete Schedule R, Part V, line 2	36		X					
37									
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X					
38	<b>9</b>								
Da	Note: All Form 990 filers are required to complete Schedule O  **T V   Statements Regarding Other IRS Filings and Tax Compliance	38	Х						
Pai									
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>					
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No					
	Enter the number of Forms wize included on line 1a. Enter of infort applicable								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v						
	(gambling) winnings to prize winners?	1c	X						

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#### 022) UNITED WAY MIAMI INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 282								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х						
3а			3a		Х					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other									
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х					
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A				37					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X					
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				Х					
	any contributions that were not tax deductible as charitable contributions?		6a							
D	If "Yes," did the organization include with every solicitation an express statement that such contribut were not tax deductible?		- Ch							
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).		6b							
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	х						
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		76							
·	to file Form 8282?	•	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year	I I								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e							
_	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									
g										
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by the								
	sponsoring organization have excess business holdings at any time during the year?									
9	9 Sponsoring organizations maintaining donor advised funds.									
а	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? $$		9b							
10	Section 501(c)(7) organizations. Enter:	1 1								
а	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:	l I								
а	Gross income from members or shareholders	11a								
D	Gross income from other sources. (Do not net amounts due or paid to other sources against	446								
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	12a							
		12b	IZa							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120								
	Is the organization licensed to issue qualified health plans in more than one state?		13a							
-	Note: See the instructions for additional information the organization must report on Schedule O.		100							
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								
С	Enter the amount of reserves on hand	13c								
14a			14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration or								
	excess parachute payment(s) during the year?		15		Х					
	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	nt income?	16		X					
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

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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.

	Check if Schedule O contains a response or note to any line in this Part VI			X								
Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year											
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.											
b	Enter the number of voting members included on line 1a, above, who are independent 1b 33											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other											
	officer, director, trustee, or key employee?											
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х								
5												
6	Did the organization have members or stockholders?	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?	7a		Х								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or											
	persons other than the governing body?	7b		Х								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:											
а	The governing body?	8a	Х									
b	Each committee with authority to act on behalf of the governing body?	8b	Х									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the											
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)											
			Yes	No								
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х									
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,											
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	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	Х									
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.											
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe											
	on Schedule O how this was done	12c	Х									
13	Did the organization have a written whistleblower policy?	13	Х									
14	Did the organization have a written document retention and destruction policy?	14	Х									
15	Did the process for determining compensation of the following persons include a review and approval by independent											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official	15a	Х									
b	Other officers or key employees of the organization	15b	Х									
	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											
	taxable entity during the year?	16a		X								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation											
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's											
	exempt status with respect to such arrangements?	16b										
Sec	tion C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed ${f FL}$											
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	) avail	able								
	for public inspection. Indicate how you made these available. Check all that apply.											
	X Own website X Another's website X Upon request Other (explain on Schedule O)											
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d fina	ncial									
_	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 - 305-860-3000											
	3250 SW 3RD AVENUE, MIAMI, FL 33129											

## 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, box 6 of 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.

Check this box if neither the organization n	T .	orga I	ınıza			npe	isate	•		(E)
<b>(A)</b> Name and title	(B) Average			( <b>)</b> Pos	ition	1		<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
Name and the	hours per		not c	heck	more	than		compensation	compensation	amount of
	week					or/trus		from	from related	other
	(list any	director						the	organizations	compensation
	hours for	5	8			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual tr	tional		nploy	st con	_	1099-1120)		organizations
	line)	In divid ual trustee	Institutional trustee	Office r	Key employee	Highest compensated employee	Forme			
(1) MARIA ALONSO	0.00									
PRESIDENT & CEO (FORMER)							Х	263,671.	0.	1,246.
(2) CARLOS MOLINA	1.00									
CHIEF FINANCIAL & ADMINISTRATIVE OFF				Х				233,146.	0.	25,240.
(3) SYMERIA T. HUDSON	1.00								_	
PRESIDENT & CEO				Х				239,551.	0.	7,019.
(4) MARY DONWORTH	1.00							000 401	•	04 004
CHIEF PROGRAM OFFICER	0 00			Х				203,431.	0.	24,324.
(5) OCTAVIO ZUBIZARRETA	0.00	-					37	216 074	0	10 057
INTERIM PRESIDENT/CEO	1 00						Х	216,874.	0.	10,057.
(6) NORIE DEL VALLE	1.00	-		х				107 /02	0.	16 7/2
(7) GLADYS MONTES	0.00			Δ				187,493.	0.	16,743.
	0.00	1					х	167,683.	0.	15,806.
GROUP V.P., CENTER FOR EXCELLENCE  (8) CELIO ROMANACH	1.00						Λ	107,005.	0.	13,000.
INTERIM SVP, MARKETING AND COMMUNICA	1.00	1				x		170,762.	0.	11,389.
(9) BLANCO CRISTINA	0.00							17077020		11,303
CHIEF COMMUNICATIONS OFFICER		1					х	139,852.	0.	9,515.
(10) YVETTE ZARAGOZA	1.00									2,020
CONTROLLER		1				x		113,159.	0.	15,355.
(11) ELIF PALABIYIK	1.00							-		-
AVP, BUSINESS SOLUTIONS		1				Х		110,771.	0.	15,932.
(12) VANESSA BENAVIDES	1.00									
VICE PRESIDENT, COMMUNITY IMPACT						Х		103,063.	0.	13,975.
(13) MERLINE LEONCE	1.00									
AVP, IT AND FACILITY MANAGEMENT						Х		100,336.	0.	12,544.
(14) JAYNE ABESS	0.00									
DIRECTOR		Х						0.	0.	0.
(15) SHELDON T. ANDERSON	0.00									
DIRECTOR	0.00	Х						0.	0.	0.
(16) ANDREW L. ANSIN	0.00							•		•
DIRECTOR	0 00	Х						0.	0.	0.
(17) STEVEN J. BRODIE, ESQ	0.00	₹,						•	_	^
DIRECTOR	<u> </u>	Х						0.	0.	0.

232007 12-13-22

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (C) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC/ from the related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations (ey employee 1099-NEC) and related below organizations line) 0.00(18) LILIA C. DIBELLO, ED.D 0. 0. 0. DIRECTOR X (19) EDDIE L. DOMINGUEZ, JR. 0.00 X 0 0. 0. DIRECTOR (20) BALDWYN ENGLISH, JR. 0.00 0 X 0. 0. DIRECTOR (21) BRANDON E. GILLILAND 0.00 X 0 0. DIRECTOR 0. (22) MELISSA A. GRACEY 0.00 0 0 DIRECTOR X Ο. 0.00 (23) JUAN C. LISCANO 0. X 0. 0. DIRECTOR (24) SUSAN POTTER NORTON, ESQ. 0.00 X 0. 0. 0. DIRECTOR 0.00 (25) GLADYS C. REED X 0. 0. 0. DIRECTOR 0.00 (26) CARMEN SABATER DIRECTOR Х 0 0 0. 2,249,792 0. 179,145. 1b Subtotal 0 0. 0. c Total from continuation sheets to Part VII, Section A 2,249,792. 0. 179,145. d Total (add lines 1b and 1c).

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

13 Yes No 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 Х 3 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 Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

#### **Section B. Independent Contractors**

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	348,455.
CONDOR SERVICES & MANAGEMENT		
15475 SW 146 TERRACE, MIAMI, FL 33196	CLEANING SERVICE	246,364.
AMERICAN SERVICE INDUSTRIES		
PO BOX 171240, MIAMI, FL 33017	CLEANING SERVICE	229,575.
CUSTOM PROTECTION SERVICES		
2510 NW 97 AVENUE, MIAMI, FL 33172	SECURITY SERVICES	197,983.
COLLIERS INTERNATIONAL		
28158 NETWORK PLACE, CHICAGO, IL 60673	PROPERTY MANAGEMENT	189,709.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION

Form 990 UNITED W										0840
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	s, aı	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C	<b>C)</b>			(D)	(E)	(F)
Name and title	Average			Posi	ition	1		Reportable	Reportable	Estimated
	hours	(с	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	L				oyee		the	organizations	compensation
	(list any	recto				em pl		organization	(W-2/1099-MISC)	from the
	hours for related	or di	ee			sated		(W-2/1099-MISC)		organization
	organizations	ruste(	L frus		ee	npen				and related organizations
	below	dualt	tiona		(oldu	st cor				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ROBERT E. SANCHEZ	0.00									
DIRECTOR		Х						0.	0.	0 .
(28) PENELOPE S SHAFFER, PH.D.	0.00									
DIRECTOR		Х						0.	0.	0 .
(29) ANA VEIGAMILTON	0.00									
DIRECTOR		Х						0.	0.	0.
(30) ALEXANDER P. ADAMS	0.00							_	_	_
DIRECTOR		Х						0.	0.	0 .
(31) DOUG BARTEL	0.00	l								•
DIRECTOR	0.00	Х						0.	0.	0.
(32) PETER L. BERMONT	0.00	,,							0	0
DIRECTOR	0.00	Х						0.	0.	0 .
(33) ALFRED A. BUNGE	0.00	7.							0	0
DIRECTOR	0.00	Х						0.	0.	0.
(34) CAMILA COTE	0.00	x						0.	0.	0.
DIRECTOR (35) NAFTALI HOLTZ	0.00	^						0.	0.	0.
DIRECTOR	0.00	X						0.	0.	0 .
(36) SETH R. KAPLAN	0.00								0.	- 0 (
DIRECTOR	0.00	X						0.	0.	0.
(37) JESS S. LAWHORN JR.	0.00									
DIRECTOR		x						0.	0.	0 .
(38) JEFF LOZAMA	0.00							-		
DIRECTOR		х						0.	0.	0 .
(39) MAYI DE LA VEGA	0.00									
DIRECTOR		X						0.	0.	0 .
(40) ALAN T. DIMOND	0.00									
DIRECTOR		Х						0.	0.	0 .
(41) BILL DUQUETTE	0.00									
DIRECTOR		Х						0.	0.	0 .
(42) MIKE G. FARRA	0.00									
DIRECTOR		Х						0.	0.	0.
(43) JOSE KEICHI FUENTES	0.00									
DIRECTOR		Х						0.	0.	0.
(44) LUIS GAMONEDA	0.00								_	-
DIRECTOR	1 2 2 2	Х					_	0.	0.	0 .
(45) CALIXTO J. GARCIA-VELEZ	0.00	1								•
DIRECTOR	1 0 00	Х				_		0.	0.	0 .
(46) BRIAN Y. GOLDMEIER	0.00	X						0.	0.	0 .
DIRECTOR										

D 17/11										
Part VII Section A. Officers, Directors, To	rustees, Key Eı	mple	oyee			ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per					au au		from	from related	other
	week (list any	JO.				oloye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(88-2/1099-181130)	organization
	related	ee or	stee			nsate		(** 2) 1000 111100)		and related
	organizations	trust	ıal fru		yee	om pe				organizations
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ner			
	line)	ınd	Insti	Officer	Key	Higi	Former			
(47) AMINDA MARQUES GONZALEZ	0.00									
DIRECTOR		Х						0.	0.	0 .
(48) FRANCISCO GONZALEZ	0.00									
DIRECTOR		Х						0.	0.	0 .
(49) XAVIER GONZALEZ	0.00									
DIRECTOR		Х						0.	0.	0 .
(50) ROBERT MCFARLIN	0.00									
DIRECTOR		Х						0.	0.	0
(51) ZAK ODHWANI	0.00							_	_	_
DIRECTOR		Х						0.	0.	0
(52) DARRELL W. PAYNE	0.00									
DIRECTOR		Х						0.	0.	0
(53) THOMAS J. PELHAM	0.00									
DIRECTOR		Х						0.	0.	0 .
(54) LARRY QUINLAN	0.00									
DIRECTOR		Х						0.	0.	0
(55) DUANY RUIZ	0.00	l								
DIRECTOR		Х						0.	0.	0
(56) JAY STEINMAN	0.00									•
DIRECTOR	0.00	Х						0.	0.	0
(57) JOHN C. SUMBERG	0.00									•
DIRECTOR	0.00	Х						0.	0.	0
(58) RASHD D. THOMAS	0.00	,,							0	0
DIRECTOR	0.00	Х						0.	0.	0
(59) MIKE VALDES-FAULI	0.00	,,							0	0
DIRECTOR	0.00	Х						0.	0.	0
(60) KIM Y. GRIFFIN-HUNTER	0.00	,,							0	0
DIRECTOR	0.00	Х						0.	0.	0 .
(61) JASON JENKINS	0.00	X							0	0
DIRECTOR	0.00	Δ						0.	0.	0 .
(62) JENNIFER ADGER GRANT	0.00	7.							0	0
DIRECTOR	0.00	Х						0.	0.	0 .
(63) ALBERTO IGNACIO DE CARDENAS	0.00	X						0.	0.	0
DIRECTOR	0.00	Δ						0.	0.	0
(64) MARSHALL MARTIN	0.00	X						0.	0.	0
DIRECTOR (65) KARLA MARGARITA MATS	0.00	^		$\vdash$		$\vdash$	$\vdash$	0.	0.	0.
	0.00	X						0.	0.	0
	1	ΙΔ.		Ш		_	_	0.	0.	U .
DIRECTOR  (66) HARVE A MOCHIC	0 00	1								
DIRECTOR (66) HARVE A. MOGULS DIRECTOR	0.00	X						0.	0.	0 .

Form 990 UNITED W	AY MIAM	L .	LMC	<u> </u>					59-083	0840
Part VII Section A. Officers, Directors, Tru	Compensated Employees (continued)									
<b>(A)</b> Name and title	(B) Average hours	(cl		Pos	C) ition that		oly)	<b>(D)</b> Reportable compensation	(E) Reportable compensation from related organizations (W-2/1099-MISC)	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)		other compensation from the organization and related organizations
(67) DAVID ZAMBRANA DIRECTOR	0.00	x						0.	0.	0
DIRECTOR		Α						0.	0.	U
Total to Part VII, Section A, line 1c	<u> </u>									

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	<b>(D)</b> Revenue excluded
				Total revenue	Related or exempt function revenue	Unrelated business revenue	from tax under
					lanotion revenue	business revenue	sections 512 - 514
nts its	1 8	Federated campaigns 1a					
irar		Membership dues 1b					
Å,		Fundraising events 1c	1,747,165.				
ar fit		Related organizations 1d					
s, G		Government grants (contributions)	11,905,725.				
ö		All other contributions, gifts, grants, and					
the		similar amounts not included above 1f	39,564,262.				
ÖĘ		Noncash contributions included in lines 1a-1f	4,217,877.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f		53,217,152.			
			Business Code	, ,			
o l	2 :	TUITION	611600	619,130.	619,130.		
Program Service Revenue	- 1	FISCAL AGENT FEES	900099	350,332.	350,332.		
				7	, , , , , , , , ,		
E Š		, I					
Regis	`	·					
Pro	`	All other program service revenue					
		<b>-</b>		969,462.			
$\rightarrow$	3	Investment income (including dividends, intere		303,102.			
	3	other similar amounts)		2,854,274.			2,854,274.
	4	Income from investment of tax-exempt bond p		2,001,2/1			
	5	Royalties					
	3	(i) Real	(ii) Personal				
	6 4		(ii) i diddinai				
		D Less: rental expenses 6b 8,593.  Rental income or (loss) 6c 689,141.					
		d Net rental income or (loss)		689,141.			689,141.
		a Gross amount from sales of (i) Securities	(ii) Other	005,141.			005,141.
	, ,	assets other than inventory 7a 46,872,836.	(ii) Oti ioi				
		Less: cost or other basis					
<u>o</u>		and sales expenses <b>7b</b> 36,463,529.					
enr							
ther Revenue		. ,		10,409,307.			10,409,307.
P.		Net gain or (loss)		10,405,507.			10,405,507.
手	0 6	including \$ 1,747,165. of					
		contributions reported on line 1c). See					
		Part IV, line 188a	1,030,823.				
		Less: direct expenses 8b	1,009,386.				
		Note that the second se		21,437.			21,437.
		Gross income from gaming activities. See	 [	21,107.			21,457.
	9 6	Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	10 6	-					
		and allowances10a  Less: cost of goods sold 10b					
		•	•				
$\dashv$		Net income or (loss) from sales of inventory	Business Code				
Snc -	11 4	OTHER MISCELLANEOUS REVENUE	900099	97,077.	97,077.		
ne			33333	37,377.	37,077.		
Miscellaneous Revenue	,						
isc. Re		All other revenue					
Σ		• Total. Add lines 11a-11d	1	97,077.			
	12	Total revenue. See instructions		68,257,850.	1,066,539.	0.	13,974,159.
					,		, ,

232009 12-13-22

#### Part IX | Statement of Functional Expenses

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

Do r	Check if Schedule O contains a responsor include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	25 041 442	25 041 440		
	and domestic governments. See Part IV, line 21	35,041,442.	35,041,442.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 506 050	1 155 020	410 755	20 266
	trustees, and key employees	1,596,959.	1,155,838.	410,755.	30,366
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10 600 475	C 450 715	2 202 420	1 046 240
7	Other salaries and wages	10,689,475.	6,450,715.	2,292,420.	1,946,340
8	Pension plan accruals and contributions (include	400 400	227 110	00 746	64 606
_	section 401(k) and 403(b) employer contributions)	490,482.	337,110. 872,509.	88,746.	64,626 167,266
9	Other employee benefits	1,269,466.		229,691.	
10	Payroll taxes	945,223.	598,608.	192,611.	154,004
11	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17	165 450		165 450	
f	Investment management fees	165,459.		165,459.	
g	Other. (If line 11g amount exceeds 10% of line 25,	2 120 052	1 500 040	270 450	242 561
	column (A), amount, list line 11g expenses on Sch O.)	2,130,053.	1,509,042.	378,450.	242,561
12	Advertising and promotion	2,301,894.	1,168,221.	572,176.	561 /07
13	Office expenses	2,301,094.	1,100,221.	3/2,1/0.	561,497
14	Information technology				
15	Royalties	2,362,093.	1,798,117.	487,923.	76,053
16	Occupancy	2,302,093.	1,/90,11/•	407,923.	70,033
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	319,711.	302,228.	14,931.	2,552
19 20	Conferences, conventions, and meetings	515,111	302,220•	17,3310	۵,332
20 21	Interest  Payments to affiliates				
21 22	Payments to affiliates	1,007,777.	339,774.	402,922.	265,081
22 23			333,1146	102,522.	200,001
23 24	Insurance				
<b>4</b> 7	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 0.)				
а	SCHOOL AND OTHER PROGRA	1,267,923.	1,249,416.	13,326.	5,181
a b	THE THE THE PARTY OF THE PARTY	_,,	_,, ==0 •	10,0200	3,101
C					
d					
	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e	59,587,957.	50,823,020.	5,249,410.	3,515,527
	Joint costs. Complete this line only if the organization	05,001,551.	50,025,020	3,213,4100	3,313,321
26					
26					
26	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part )	^_	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	1	Cash - non-interest-bearing			2,589,127.	1	3,608,112
2	2	Savings and temporary cash investments			26,222,325.	2	27,845,976
3	3				10,661,356.	3	9,433,918
4	4	Accounts receivable, net			2,166,865.	4	2,700,116
5	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial (	contributor, or 35%			
		controlled entity or family member of any of thes	e pers	ons		5	
6	6	Loans and other receivables from other disqualif	ied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	d in sec	ction 4958(c)(3)(B)		6	
န္ 7	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
9   ◄	9	Prepaid expenses and deferred charges			211,158.	9	268,938
10	0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	40,886,772.			
	b	Less: accumulated depreciation	10b	15,964,581.		10c	24,922,191
11	1	Investments - publicly traded securities			67,502,507.		69,296,606
12	2	Investments - other securities. See Part IV, line 1	1		3,437,781.	12	3,885,029
13	3	Investments - program-related. See Part IV, line 1	11			13	
14	4	Intangible assets				14	
15	5	Other assets. See Part IV, line 11			8,560,708.	15	8,572,522
16	6	Total assets. Add lines 1 through 15 (must equa			146,891,881.	16	150,533,408
17	7	Accounts payable and accrued expenses			3,968,998.	17	5,230,214
18	В	Grants payable			72,307.	18	
19	9	Deferred revenue			0 100 500	19	0 256 520
20		Tax-exempt bond liabilities			9,102,588.	20	8,356,739
21		Escrow or custodial account liability. Complete F				21	
<u>ဗ</u>   22	2	Loans and other payables to any current or form					
<u> </u>		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				22	
23		Secured mortgages and notes payable to unrela				23	
24		Unsecured notes and loans payable to unrelated				24	
25	5	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24	). Complete Part X	53,446,221.		52,984,558
	_	of Schedule D			66,590,114.		66,571,511
26	0	Total liabilities. Add lines 17 through 25			00,390,114.	26	00,371,311
S S		Organizations that follow FASB ASC 958, che	ck ner	e <u>11</u>			
<u>27</u>	7	and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions			70,890,724.	27	74,280,078
		Net assets with donor restrictions  Net assets with donor restrictions			9,411,043.	28	9,681,819
פַ   בּי	5	Organizations that do not follow FASB ASC 9			J, 111, 013.	20	3,001,013
호		and complete lines 29 through 33.	JO, CIII	eck liefe			
ັ <sub>ທ</sub> 29	a	Capital stock or trust principal, or current funds				29	
sets   30		Paid-in or capital surplus, or land, building, or eq				30	
8   31 31		Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances 32 32 32 33 33 33 33 33 33 33 33 33 33		Total net assets or fund balances			80,301,767.		83,961,897
2   32		Total liabilities and net assets/fund balances			146,891,881.		150,533,408
33		TOTAL HADIILIES AND HEL ASSELS/TUND DAIANCES				_ 33	Form <b>990</b> (202

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		8,25		
2	Total expenses (must equal Part IX, column (A), line 25)		59,58		
3	Revenue less expenses. Subtract line 2 from line 1	3	8,66		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		30,30		
5	Net unrealized gains (losses) on investments	5 -	-5,00	9,7	<u>63.</u>
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	33,96	1,8	<u>97.</u>
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	e O.			
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	d 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 separat	e 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	e 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 Scl				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
	· · · · · · · · · · · · · · · · · · ·			990 (	(2022)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNITED WAY MIAMI INC.

Employer identification number 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). 7 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.) 8 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 university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

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

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

Sec	ction A. Public Support	71	•	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	,	( )	( )	,	( )	
	membership fees received. (Do not						
	include any "unusual grants.")	53,897,585.	57,598,444.	110,721,107.	50,414,009.	52,217,152.	324,848,297.
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	1,359,258.	1,606,279.	1,934,985.		332,290.	5,744,736.
	Total. Add lines 1 through 3	55,256,843.	59,204,723.	112,656,092.	50,925,933.	52,549,442.	330,593,033.
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)						
	Public support. Subtract line 5 from line 4.						330,593,033.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	55,256,843.	59,204,723.	112,656,092.	50,925,933.	52,549,442.	330,593,033.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,926,738.	1,922,616.	2,112,359.	2,280,380.	2,854,274.	11,096,367.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				000 046	445 400	
	assets (Explain in Part VI.)	386,361.	279,727.	1,825,071.	277,916.	447,409.	
11	<b>Total support.</b> Add lines 7 through 10						344,905,884.
12	•						,817,379.
13	First 5 years. If the Form 990 is for the	-	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stor						<u></u>
	ction C. Computation of Publ					-	05 05
	Public support percentage for 2022 (					14	95.85 % 96.38 %
	Public support percentage from 2021					15	
16a	33 1/3% support test - 2022. If the c						
_	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes	•					•
	and if the organization meets the fact					VI how the organiz	ation
_	meets the facts-and-circumstances to	-			-		
b	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circ						
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 1/a, or 17b	o, check this box a		S

#### 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	, <u>, , , , , , , , , , , , , , , , , , </u>	,				
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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						
ŀ	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						
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2022 (	line 8, column (f), o	divided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	ifies as a publicly	supported organiz	ation	
ŀ	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che	ck this box and st	t <b>op here.</b> The orga	nization qualifies	as a publicly supp	orted organization	
20	Private foundation If the organization	n did not chack a	boy on line 14 10	a or 10h chock t	his hay and soo in	etructions	1 1

#### Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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		
_		
3a		
3b		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
90		
10a		
10b		

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Seci	ion D. All Type III Supporting Organizations		· ·	- · ·
	Did the approximation approximate cook of the approximated approximations, by the least day of the fifth mouth of the		Yes	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2022 UNITED WAY MIAMI INC.			09-0030040 Page 6
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complet	te 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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			

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

Schedule A (Form 990) 2022

instructions).

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A. PAR	TII, LINE 10, EXPLANATION FOR OTHER INCOME:
FISCAL AGENT FE	
2018 AMOUNT: \$	277,547.
2019 AMOUNT: \$	220,583.
2020 AMOUNT: \$	351,433.
2021 AMOUNT: \$	222,345.
2022 AMOUNT: \$	350,332.
OTHER MISCELANE	COUS REVENUE
2018 AMOUNT: \$	108,814.
2019 AMOUNT: \$	59,144.
2020 AMOUNT: \$	1,473,638.
2021 AMOUNT: \$	55,571.
2022 AMOUNT: \$	97,077.

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

2022

Employer identification number

2022

OMB No. 1545-0047

UNITED WAY MIAMI INC. 59-0830840 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$\_\_\_\_\_\_\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

 $LHA \quad \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. } \\$ 

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

#### UNITED WAY MIAMI INC.

59-0830840

Part I	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		\$ <u>11,858,800</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 2,282,802.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,249,670.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and ZIP + 4	\$ 1,197,373.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 1,370,980.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>9,317,855</u> .	Person X Payroll

Name of organization

UNITED WAY MIAMI INC.

Employer identification number

59-0830840

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		- - \$ 1,728,745.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

#### UNITED WAY MIAMI INC.

59-0830840

		1
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\ \ \$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given	Description of noncash property given  (c)  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (d)  (e)  FMV (or estimate) (See instructions.)  (e)  FMV (or estimate) (See instructions.)  (f)  FMV (or estimate) (See instructions.)  (g)  FMV (or estimate) (See instructions.)  (g)  FMV (or estimate) (See instructions.)  (h)  Description of noncash property given  (g)  (h)  (h)  Description of noncash property given  (g)  (h)  (h)  Description of noncash property given  (h)  (h)  Description of noncash property given

**Employer identification number** Name of organization 59-0830840 UNITED WAY MIAMI INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (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 Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (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)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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.

OMB No. 1545-0047 Open to Public Inspection

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

			tions: Complete Part III.			
Nan	ne of organiza		WAY MIAMI INC.		E	mployer identification number
		59-0830840				
Pa	art I-A Co	omplete if the org	janization is exempt und	der section 501(c)	or is a section 52	7 organization.
2	Political cam	paign activity expendit	cation's direct and indirect politic ures gn activities			\$
Pa	art I-B Co	omplete if the ord	janization is exempt und	der section 501(c)(	(3).	
			·			. \$
2	Enter the am	ount of any excise tax	incurred by organization manag	ers under section 4955	· · · · · · · · · · · · · · · · · · ·	\$
3	If the organiz	ation incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
b	If "Yes," des	cribe in Part IV.				
Pa	art I-C Co	omplete if the org	janization is exempt und	der section 501(c),	except section 5	01(c)(3).
1	Enter the am	ount directly expended	by the filing organization for se	ection 527 exempt funct	tion activities	. \$
2	Enter the am	ount of the filing organ	ization's funds contributed to o	ther organizations for se	ection 527	
						. \$
3	Total exempt	t function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL,	,	
	line 17b					. \$
4			1120-POL for this year?			
5	made payme contributions	ents. For each organiza received that were pr	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	id from the filing organiz a separate political orga	zation's funds. Also ente anization, such as a sep	er the amount of political
	(a)	) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds. If none, enter	contributions received and

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

Schedule C (Form 990) 2022

LHA

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	edule C (Form 990) 2022	UNITED WAY	MIAMI INC.	n 501(c)(3) and fi	59-0 led Form 5768 (el	830840 Page 2			
· ·	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
A	Check if the filing organiza	ation belongs to an affi	iliated group (and list ir	Part IV each affiliated	d group member's nam	e, address, EIN,			
	expenses, and sha	re of excess lobbying	expenditures).						
В	Check if the filing organiza	ation checked box A a	nd "limited control" pro	visions apply.					
		its on Lobbying Expe ditures" means amou	nditures unts paid or incurred.	)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals			
1a	Total lobbying expenditures to infl	uence public opinion (	(grassroots lobbying)		106,946.				
b	Total lobbying expenditures to infl	uence a legislative bo	dy (direct lobbying)		7,844.				
c	: Total lobbying expenditures (add I	ines 1a and 1b)			114,790.				
c	Other exempt purpose expenditur				59,473,167.				
e	Total exempt purpose expenditure	es (add lines 1c and 1d	d)		59,587,957.				
	Lobbying nontaxable amount. Ent				1,000,000.				
	If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:					
	Not over \$500,000 20% of the amount on line 1e.								
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.								
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.								
	Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.					
	Over \$17,000,000	\$1,000,	000.						
	Grassroots nontaxable amount (er	nter 25% of line 1f)			250,000.				
h	Subtract line 1g from line 1a. If zer	ro or less, enter -0			0.				
i	Subtract line 1f from line 1c. If zero	o or less, enter -0			0.				
j	If there is an amount other than ze	ero on either line 1h or	line 1i, did the organiza	ation file Form 4720					
	reporting section 4911 tax for this	year?				Yes No			
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)								
		Lobbying Expe	nditures During 4-Yea	ar Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total			

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total				
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.				
c Total lobbying expenditures	116,688.	104,631.	123,891.	114,790.	460,000.				
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.				
f Grassroots lobbying expenditures	93,350.	83,350.	99,113.	106,946.	382,759.				

Schedule C (Form 990) 2022

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)).

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N
•
•
-
-

#### **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.

**Employer identification number** 59-0830840

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
	organization answered "Yes" on Form 990, Part IV, line 6.						
		(a) Donor advised	funds	(b) Funds and other accounts			
1	Total number at end of year		18				
2	Aggregate value of contributions to (during year)		62,464.				
3	Aggregate value of grants from (during year)		33,544.				
4	Aggregate value at end of year	31,7	78,230.				
5	Did the organization inform all donors and donor advisors in	writing that the assets hel	d in donor advised fu				
	are the organization's property, subject to the organization's	exclusive legal control?		X Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that gra	nt funds can be used	l only			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any	other purpose confe				
	impermissible private benefit?						
Par	·		on Form 990, Part I'	V, line 7.			
1	Purpose(s) of conservation easements held by the organizat						
	Preservation of land for public use (for example, recrea			torically important land area			
	Protection of natural habitat		Preservation of a cer	tified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribu	tion in the form of a o				
	day of the tax year.			Held at the End of the Tax Year			
а	Total number of conservation easements			2a			
b							
C	Number of conservation easements on a certified historic str			2c			
d	Number of conservation easements included in (c) acquired						
_	historic structure listed in the National Register						
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or to	erminated by the orga	anization during the tax			
	year						
4	Number of states where property subject to conservation ea		and the second Control of				
5	Does the organization have a written policy regarding the pe			Yes No			
6	violations, and enforcement of the conservation easements in Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations on	d onforcing consonus	tion cooments during the year			
6	Starrand volunteer rours devoted to morntoning, inspecting,	Transming or violations, and	a emorcing conserva	tion easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enf	orcina conservation e	easements during the year			
•	, thought of expenses mounted in monitoring, inspecting, hand	aming or violations, and on	orolling correctivation (	sacomente dannig the year			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirement	s of section 170(h)(4)	(B)(i)			
_	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservat						
	balance sheet, and include, if applicable, the text of the foot		· · · · · · · · · · · · · · · · · · ·				
	organization's accounting for conservation easements.	ŭ					
Par	t III Organizations Maintaining Collections o	f Art, Historical Tre	asures, or Other	Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its reve	nue statement and b	alance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education,	or research in further	ance of public			
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that desc	cribes these items.				
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue	statement and balan	ice sheet works of			
	art, historical treasures, or other similar assets held for public	e exhibition, education, or	research in furtheran	ce of public service,			
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1			\$			
	(ii) Assets included in Form 990, Part X			\$			
2	If the organization received or held works of art, historical tre	easures, or other similar as	sets for financial gain	n, provide			
	the following amounts required to be reported under FASB A	ASC 958 relating to these i	tems:				
а	Revenue included on Form 990, Part VIII, line 1						
<u>b</u>	Assets included in Form 990, Part X						
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2022			

Pai	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, d	or Othe	r Simila	r Asse	<b>ts</b> (contii	nued)	<u> </u>
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its									
	collection items (check all that apply):									
а										
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organizati	on's exer	npt purpo:	se in Par	t XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	sures, or oth	er similar	assets		_		_
	to be sold to raise funds rather than to be ma							Yes		No
Pa	t IV Escrow and Custodial Arran		ete if the organizatio	n answered	"Yes" on	Form 990,	Part IV,	line 9, o	ſ	
	reported an amount on Form 990, Part X, line 21.									
та	Is the organization an agent, trustee, custod							٦,,		٦
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					Amoun	+	
	B							Amoun	ι	
	Beginning balance									
	Additions during the year									
e	Distributions during the year									
f	Ending balance					. <b>1f</b>		1,,		Т
	Did the organization include an amount on F					ity?	🗀	Yes		∐ No
_	If "Yes," explain the arrangement in Part XIII. <b>t V Endowment Funds.</b> Complete i									
ı aı	Endowment I dids. Complete	(a) Current year	(b) Prior year	(c) Two year			ars hack	(e) Fou	rvears	hack
10	Beginning of year balance	30,666,376.	35,750,544.	<u> </u>			8,941.	• •	,928,	
	Contributions	1,155,615.	914,089.	<del>                                     </del>	8,465.		28,449.		,3 <u>20,</u> ,182,	
		3,555,469.	-4,539,456.	<del> </del>	9,625.		30,992.		,383,	
C C	Net investment earnings, gains, and losses	348,339.	348,339.	<del> </del>	8,339.		88,738.			241.
	Grants or scholarships	340,337.	340,337.	34	0,337.		70,730.		302,	, 241.
е	Other expenditures for facilities	1,459,507.	1,110,162.	1,10	6 665	1.0	2,606.		1 2 1	095.
	and programs	1,435,307.	1,110,102.	1,10	0,005.		66,580.		,141,	
	Administrative expenses	33,917,953.	30,666,376.	35 75	0 544		27,458.		, 868,	
g 2	End of year balance  Provide the estimated percentage of the cur				0,544.	23,32	17,430.	24	, 000,	, , , , , , ,
2 a	Board designated or quasi-endowment	75.1800	%	a)) Helu as.						
b	Permanent endowment 24.8200	%								
C										
·	The percentages on lines 2a, 2b, and 2c sho	, -								
32	Are there endowment funds not in the posses	•	ation that are held a	nd administe	ared for th	ne				
Ou	organization by:	331011 Of the organize	ation that are neid a	ina aaniinista	ica ioi ti				Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations									Х
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the									
Pai	rt VI Land, Buildings, and Equipm									
	Complete if the organization answere		), Part IV, line 11a. S	See Form 990	), Part X,	line 10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other	(c) Ac	cumulated	3	(d) Boo	k valu	<u>е</u>
	,	basis (investr		(other)		reciation		` ,		
1a	Ta Land 7,019,337. 7,019,337								37.	
b	20 271 622 12 240 110 17 021 5									
С	Leasehold improvements		-							
d	2 240 145   2 724 462   615 603							83.		
е	e Other 255,657. 255,657.								57.	
	I. Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1	10c.)			2	4,92	2,1	91.
							chedule	D (Forn	n 990)	2022

Schedule D (Form 990) 2022 UNITED WAY	MIAMI INC.	59-0830840 Page <b>3</b>
Part VII Investments - Other Securities.	"	441 O E 000 B 144 II 40
Complete if the organization answered "Yes		•
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
<u>(F)</u>		
(G)		
(H)  Tatal (Col. (h) must squal Form 000, Port V col. (P) line 10.)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments - Program Related.		
Complete if the organization answered "Yes	" on Form 990 Part IV line	11c See Form 990 Part Y line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	(b) Book value	(c) Method of Valuation. Gost of the of year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
Complete if the organization answered "Yes	" on Form 990 Part IV line	11d See Form 990 Part Y line 15
	Description	(b) Book value
	NERSHIP	8,509,679.
(2) RIGHT OF USE ASSETS	чинонтт	62,843.
(-)		02,043.
(3)		
<u>(4)</u>		
(5)		
(6)		
(7)		
(8) (9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ne 15 )	8,572,522.
Part X Other Liabilities.	nc 10.)	0,372,322
Complete if the organization answered "Yes	" on Form 990 Part IV line	11e or 11f. See Form 990. Part X. line 25
1. (a) Description of liability	on on our object are re, mile	(b) Book value
(1) Federal income taxes		(2) 2001. 12.00
(2) APPROVED ALLOCATIONS PAY	ARLE	8,142,478.
(3) DONOR-DESIGNATED ALLOCAT		0,222,270
(4) PAYABLE	10110	36,332,401.
(5) SPECIAL CONTRIBUTIONS ALI	LOCATIONS	30,332,401.
(6) PAYABLE		8,509,679.
		0,303,013.
<u>(7)</u>		
(8) (9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ne 25 )	52,984,558.
i osam (column (b) mast equal rollin 330, r art A, col. (b) li	20./	

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

Schedule D (Form 990) 2022

		(Form 990) 2022 UNITED WAY MIAMI INC.				0830840 Page	
Pa	rt XI	Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per F	leturi	n.	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total	revenue, gains, and other support per audited financial statements			1	40,051,993	
2		unts included on line 1 but not on Form 990, Part VIII, line 12:		l			
а		ınrealized gains (losses) on investments	2a	-5,009,763.	_		
b		ted services and use of facilities	2b				
С		veries of prior year grants	2c				
d	Othe	r (Describe in Part XIII.)	2d				
е	Add	ines 2a through 2d			2e	-5,009,763	
3	Subt	ract line <b>2e</b> from line <b>1</b>			3	45,061,756	
4		unts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b r (Describe in Part XIII.)	4a	165,459.			
b	Othe	r (Describe in Part XIII.)	4b	23,030,635.			
С	Add	ines <b>4a</b> and <b>4b</b>			4c	23,196,094	
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	68,257,850	
Pa	rt XII	Reconciliation of Expenses per Audited Financial Stateme	nts \	With Expenses per	Retu	ırn.	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total	expenses and losses per audited financial statements			1	36,391,863	
2		unts included on line 1 but not on Form 990, Part IX, line 25:					
а	Dona	ted services and use of facilities	2a				
b		year adjustments	2b				
С		r losses	2c				
d		r (Describe in Part XIII.)	2d				
е		ines <b>2a</b> through <b>2d</b>			2e	0	
3		ract line <b>2e</b> from line <b>1</b>			3	36,391,863	
4		unts included on Form 990, Part IX, line 25, but not on line 1:					
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	165,459.			
b		r (Describe in Part XIII.)	4b	23,030,635.	-		
c		ines <b>4a</b> and <b>4b</b>			4c	23,196,094	
5		expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.)			5	59,587,957	
		Supplemental Information.				00 / 00 1 / 00 1	
		e descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/ line	s 1h and 2h: Part V line	⊿· Part	t X line 2: Part XI	
		d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit			<b>-</b> τ, ι αιτ	17, IIIC 2, 1 art 71,	
111163	Zu an	u 4b, and Fart Air, lines 2u and 4b. Also complete this part to provide any addit	ioriai ii	normation.			
РΔΙ	<b>γ Τ</b> Σ	7, LINE 4:					
		, DIND 4.					
TNI	reni	DED USES OF THE ORGANIZATION'S ENDOWMENT	וותי	NDS ARE BOAR	ם ח	ESTGNATED	
	T TT/1	DED COED OF THE CHOMMENTENTION D ENDOWMENT		TIDD MILL DOMIN	ם ם.	<u> </u>	
EMI	OWN	MENT - TO PROVIDE OPERATING RESOURCES FO	ът	ם בסווייום בעי	ъмъ	NENTLV	
17141	JOWI	TENT TO TROVIDE OF ENATING REDOURCED FO	11 1	HE FOIORE IE	ILLIA	MEMILLI	
DE	י סיחיב	CTED ENDOWMENT - THE INTEREST GENERATED	ם ים		ומ ה	ב החוכ	
1711	J 1 1 1 1	CIED ENDOWMENT THE INTEREST GENERATED	1.11	OM THE CORT	<u> </u>	r mis	
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171/1	JOWI	TEMI WILL DE OBED 10 BOFFORT THE OFERALL	OND	OF THE CENT	пи	FOR	
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<u> EV</u>	اللتار	LENCE IN EARLY EDUCATION.					
יגם	י יחכ	Z IINE 2.					
PA.	7.T. 7	K, LINE 2:					
Δ».	י תא	DECITTED MANACEMENT TO DUALITATE TAY DOCT	шт∧	אור האנדנה איני	יים כו	COCNTOD 3	
GA	AP I	REQUIRES MANAGEMENT TO EVALUATE TAX POSI	TTO	NO TAKEN AND	KE	COGNIZE A	
יגח	у т ¬	ראסדו דשע / אמים חישואוו די וואודשע / אם אמים אמים די אוד אוד מאיז מים מים א	יאים ע	י און וואוריהטהאיז	ים זא	$\bigcirc$ CTTT $\bigcirc$ NI	
TA	TAX LIABILITY (OR ASSET) IF UNITED WAY HAS TAKEN AN UNCERTAIN POSITION						

Schedule D (Form 990) 2022

THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY

TAXING AUTHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN AND

## SCHEDULE G (Form 990)

## **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.

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

UNITED	WAY MIAMI INC.				59-0830	840
	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV,	line 17. Form 990-E	Z filers are not
required to complete this par  Indicate whether the organization rais  Mail solicitations  Internet and email solicitations  Phone solicitations  In-person solicitations	sed funds through any of the following and solicitates and solicitates and solicitates are considered and solicitates.  The solicitates are solicitated and solicitates are solicitated and solicitates are solicitated and solicitates. The solicitates are solicitated and solicitated and solicitated and solicitated are solicitated and solicitated and solicitated and solicitated are solicitated and solicitated and solicitated and solicitated are solicitated and solicitated are solicitated and solicitated and solicitated and solicitated are solicitated and solicitated and solicitated and solicitated are solicitated and solicitated and solicitated are solicitated and solicitated and solicitated are solicitated and solicitated and solicitated are solicitated and solicitated and solicitated are solicitated are solicitated and solicitated are solicitated are s	ion of ion of fundra (includerofess	non-g gover ising o ding o	overnment grants nment grants events fficers, directors, true undraising services?	stees, or <b>Ye</b> s	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co 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						
<b>3</b> List all states in which the organization or licensing.	on is registered or licensed to solicit o	ontrib	utions	s or has been notified	d it is exempt from r	egistration

Schedule G (Form 990) 2022

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

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 gr	oss income on Form 990		<u> </u>	ts greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
			VERITAGE	MAYORS BALL		(add col. <b>(a)</b> through col. <b>(c)</b> )
ē			(event type)	(event type)	(total number)	55 ( <b>5</b> )/
Revenue	1	Gross receipts	1,220,999.	914,502.	642,487.	2,777,988.
	2	Less: Contributions	690,512.	809,502.	247,151.	1,747,165.
	3	Gross income (line 1 minus line 2)	530,487.	105,000.	395,336.	1,030,823.
	4	Cash prizes				
S	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	534,917.	295,572.	178,897.	
	10	- · · · · · · · · · · · · · · · · · · ·				1,009,386.
_		Net income summary. Subtract line 10 from li				21,437.
Pa	ırt l		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	١.					
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	۲		Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
		N				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Fnt	ter the state(s) in which the organization condu	icts gaming activities:			
		the organization licensed to conduct gaming a	-	states?		Yes No
		No," explain:				
		ere any of the organization's gaming licenses re	•	~	•	Yes No
b	) If "	Yes," explain:				

232082 10-27-22 Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022	UNITED WA	Y MIAMI	INC.		59-08	308	340	Page 3
11	Does the organization conduct ga	aming activities with	nonmembers?			[	Y	'es	☐ No
	Is the organization a grantor, bento administer charitable gaming?	eficiary or trustee of	a trust, or a m	ember of a partners	ship or other entity formed	-		'es	□ No
13	Indicate the percentage of gamin								
	The organization's facility					L	13a		%
	An outside facility						13b		%
14	Enter the name and address of the	e person who prepa	res the organiz	zation's gaming/sp	ecial events books and reco	rds:			
	Name								
	Address								
15a	Does the organization have a con	tract with a third par	ty from whom	the organization re	ceives gaming revenue?	[	Y	'es	☐ No
	If "Yes," enter the amount of gam of gaming revenue retained by the	e third party \$ _	d by the organ	ization \$	and the am	iount			
C	If "Yes," enter name and address	of the third party:							
	Name								
16	Gaming manager information:								
	Name								
	Gaming manager compensation	\$							
	Description of services provided								
	Director/officer	Employee		ndependent contra	actor				
17	Mandatory distributions:								
	Is the organization required under	r state law to make o	haritable distr	ibutions from the g	aming proceeds to				
	retain the state gaming license?					[	Y	'es	└── No
b	Enter the amount of distributions	•		ributed to other ex	empt organizations or spent	in the			
По	organization's own exempt activit				" O				21 401
Га	15b, 15c, 16, and 17b, as		-	•	, line 2b, columns (iii) and (v	i; and Part	III, IIne	es 9, 9	ab, IUb,
	13b, 13c, 10, and 17b, as	applicable. Also pro	Mue arry addi	ilonai imormation. c	bee instructions.				

Schedule G	i (Form 990)	UNITED WAY	MIAMI	INC.	59-0830840 Page 4
Part IV	(Form 990) Supplemental Info	rmation (continued)			<u> </u>
			<u> </u>		

## SCHEDULE I (Form 990)

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

OMB No. 1545-0047

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

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization  UNITED WA	Y MIAMI I	INC.					Employer identification number $59-0830840$
Part I General Information on Grants a	ınd Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pro</li> </ol>	stance?				y for the grants or ass		tion Yes X No
Part II Grants and Other Assistance to recipient that received more than					anization answered "\	es" on Form 990, Part	t IV, line 21, for any
Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
100 BLACK MEN OF ATLANTA, INC. 241 PEACHTREE ST. NE							
ATLANTA, GA 30303	58-1721923	501 C (3)	6,000.	0.			GENERAL SUPPORT
1000 FRIENDS OF FLORIDA 308 N MONROE ST TALLAHASSEE, FL 32301	59-2761163	501 C (3)	15,000.	0.			GENERAL SUPPORT
9 DOTS COMMUNITY LEARNING CENTER 931 N HIGHLAND AVE LOS ANGELES, CA 90038	45-2834070	501 C (3)	10,000.	0.			GENERAL SUPPORT
A HOLE IN THE ROOF FOUNDATION 29836 TELEGRAPH RD SOUTHFIELD, MI 48034	27-0609504	501 C (3)	7,500.	0.			GENERAL SUPPORT
A NEW WORLD ACADEMY 1452 NW 79TH ST MIAMI, FL 33147	45-4514859	501 C (3)	529,880.	0.			GENERAL SUPPORT
ABANDONED PET RESCUE, INC. 1137 NE 9TH AVENUE FORT LAUDERDALE, FL 33304	65-0655473	501 C (3)	8,640.	0.			GENERAL SUPPORT
2 Enter total number of section 501(c)(3) a	<u> </u>	1			<u> </u>	1	591

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

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</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		
ADOM HEALTH FOUNDATION, INC. 730 NW 34TH STREET									
MIAMI, FL 33127	59-1709438	501 C (3)	43,000.	0.			GENERAL SUPPORT		
ADRIENNE ARSHT CENTER FOUNDATION, INC 1300 BISCAYNE BLVD	06.0565000	501 (2.72)	000 554						
MIAMI, FL 33132	26-2567808	501 C (3)	909,551.	0.			GENERAL SUPPORT		
ADVOCATES FOR CHILDREN OF NEW YORK, INC - 151 W 30TH STREET -	11 2247207	E01 (2 / 2)	277 750	0.			GENERAL GUDDODE		
NEW YORK, NY 10001	11-2247307	501 C (3)	377,750.	0.			GENERAL SUPPORT		
ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK RD									
PHILADELPHIA, PA 19141	23-2290323	501 C (3)	5,500.	0.			GENERAL SUPPORT		
ALFALIT INTERNATIONAL, INC. 3026 NW 79TH AVE									
DORAL, FL 33185	59-1595459	501 C (3)	21,348.	0.			GENERAL SUPPORT		
ALPHA EPSILON PI FOUNDATION, INC. 8815 WESLEYAN RD									
INDIANAPOLIS, IN 46268	13-6141078	501 C (3)	201,000.	0.			GENERAL SUPPORT		
ALPINE LEARNING GROUP FOUNDATION, INC 777 PARAMUS RD - PARAMUS,									
NJ 07652	26-3636357	501 C (3)	18,400.	0.			GENERAL SUPPORT		
ALSAC - ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 201 E SANDPOINTE AVE - SANTA ANA, CA									
92707	35-1044585	501 C (3)	57,500.	0.			GENERAL SUPPORT		
ALSAC-ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 5201 BLUE LAGOON -									
MIAMI, FL 33126	35-1044585	pu1 C (3)	8,773.	0.			GENERAL SUPPORT		

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	
(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
ALZHEIMER'S ASSOCIATION ILLINOIS CHAPTER - 8430 W BRYN MAWR AVE - CHICAGO, IL 60631	13-3039601	501 C (3)	6,950.	0.			GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION, SOUTHEAST FLORIDA CHAPTER - 3323 W. COMMERCIAL BLVD - FT LAUDERDALE,			1,224				
FL 33309	13-3039601	501 C (3)	6,566.	0.			GENERAL SUPPORT
AMANDA ROSE LAURA FOUNDATION 27 BALDWIN DR							
BWEKELEY HEIGHTS, NJ 07922	82-2584890	501 C (3)	12,200.	0.			GENERAL SUPPORT
AMERICA BAR ASSOCIATION FUND 321 N CLARK ST.				_			
CHICAGO, IL 60654	36-6110299	501 C (3)	23,750.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY MIAMI-DADE AND MONROE - 8095 NW 12TH ST - DORAL, FL 33126	13-1788491	501 C (3)	7,348.	0.			GENERAL SUPPORT
BOME, 11 33120	13 1700431	501 C (57	7,540.	<u> </u>			SERVERIE BOTTORT
AMERICAN CANCER SOCIETY, INC 2310 ROUTE 34, STE D MANASQUAN, NJ 08736	13-1788491	501 C (3)	5,140.	0.			GENERAL SUPPORT
MANADQOAN, NO 00730	13 1700431	501 C (3)	3,140.	٠.			GENERAL BOTTORT
AMERICAN CANCER SOCIETY, INC. 3380 CHASTAIN MEADOWS PKWY NW							
KENNESAW, GA 30144	13-1788491	501 C (3)	20,400.	0.			GENERAL SUPPORT
AMERICAN COMMITTEE F/T WEIZMANN INSTITUTE OF SCIENCE, INC - 633							
3RD AVE FLOOR 20TH - NEW YORK, NY							
10017	13-1623886	501 C (3)	10,000.	0.			GENERAL SUPPORT
AMERICAN FRIENDS OF ISRAEL SPORT							
CENTER FOR THE DISABLED - 1							
NORTHFIELD PL - NORTHFIELD, IL							
60093	27-5126671	501 C (3)	8,500.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	<del>1</del>
(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	<b>(h)</b> Purpose of grant or assistance
MERICAN FRIENDS OF RABIN MEDICAL							
CENTER - 636 BROADWAY - NEW YORK,							
YY 10012	52-1903777	501 C (3)	30,900.	0.			GENERAL SUPPORT
AMERICAN FRIENDS OF YESHIVA D'MIR,							
INC 5227 NEW ULTRECHT AVE -							
BROOKLYN, NY 11219	13-2946608	501 C (3)	10,000.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION							
10 E 40TH ST							
NEW YORK, NY 10016	13-5613797	501 C (3)	14,240.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION -							
DRANGE - 4600 CAMPUS DR - IRVINE,							
CA 92617	13-5613797	501 C (3)	22,300.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION, INC.							
7272 GREENVILLE AVE	40 5640505	504 5 (0)	0.000				
DALLAS, TX 75231	13-5613797	501 C (3)	8,800.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION, INC.							
10 GLENLAKE PKWY, SOUTH TOWER							
ATLANTA, GA 30328	13-5613797	501 C (3)	17,500.	0.			GENERAL SUPPORT
AMERICAN HEART ASSOCIATION,							
PACIFIC MOUNTAIN AFFILIATE - 2929							
S 48TH ST - TEMPE, AZ 85282	13-5613797	501 C (3)	22,800.	0.			GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE GTR.							
MIAMI AND BROWARD CHAPTER - PO BOX	12 55(2202	E01 G (3)	22.204	_			CENEDAL GUDDODE
164706 - MIAMI, FL 33116	13-5563393	501 C (3)	23,394.	0.			GENERAL SUPPORT
AMERICAN RED CROSS OF GREATER							
MIAMI AND THE KEYS - 335 SW 27TH							
AVENUE - MIAMI, FL 33135	59-0651070	501 C (3)	298,544.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance			
AMERICAN SOCIETY FOR THE										
PREVENTION - 424 EAST 92ND STREET										
- NEW YORK, NY 10128	13-1623829	501 C (3)	6,130.	0.			GENERAL SUPPORT			
NEW TORK, NI 10120	13 1023023	501 € (3)	0,130.	٠.			GENERAL SULLOKI			
AMIKIDS MIAMI-DADE, INC.										
2701 NE 151 STREET										
NORTH MIAMI BEACH, FL 33160	59-15615 <b>4</b> 9	501 C (3)	113,659.	0.			GENERAL SUPPORT			
,		, , ,								
ANTI-DEFAMATION LEAGUE, ATLANTA										
3490 PIEDMONT RD NE										
ATLANTA, GA 30305	13-1818723	501 C (3)	47,140.	0.			GENERAL SUPPORT			
ARCHBISHOP'S CHARITIES DRIVE-ABCD										
9401 BISCAYNE BLVD.										
MIAMI SHORES, FL 33138	59-0865839	501 C (3)	81,951.	0.			GENERAL SUPPORT			
ARCHDIOCESE OF MIAMI INC.										
9401 BISCAYNE BOULEVARD										
MIAMI, FL 33138	65-0909504	501 C (3)	6,000.	0.			GENERAL SUPPORT			
ASIAN AMERICANS ADVANCING JUSTICE-										
ASIAN LAW CAUCUS - 55 COLUMBUS AVE										
- SAN FRANCISCO, CA 94111	94-2176139	501 C (3)	47,500.	0.			GENERAL SUPPORT			
ASPEN HOPE CENTER										
227 MIDLAND AVE										
BASALT, CO 81621	27-3703825	501 C (3)	13,500.	0.			GENERAL SUPPORT			
ACCOCTANTON OF MUE DAD OF MUE COM										
ASSOCIATION OF THE BAR OF THE CITY										
42 W 44TH ST	13 6003010	E01 G (3)	06 700	_			CENEDAL GUDDODE			
NEW YORK, NY 10036	13-6003018	501 C (3)	26,700.	0.			GENERAL SUPPORT			
ATLANTA BUSINESS LEAGUE										
FOUNDATION, INC 931 MARTIN										
LUTHER KING JR. DR ATLANTA, GA	22 725252	E01 G (3)	10.000	_			GENERAL GURSOS			
30314	23-7259350	501 C (3)	12,900.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ATLANTA HISTORICAL SOCIETY									
130 WEST PACES FERRY RD NW									
ATLANTA, GA 30305	58-0566162	501 C (3)	23,500.	0.			GENERAL SUPPORT		
ATLANTA JEWISH FILM SOCIETY, INC.									
1800 PEACHTREE ST NW									
ATLANTA, GA 30309	47-1260411	501 C (3)	18,752.	0.			GENERAL SUPPORT		
BALLET HISPANO OF NEW YORK									
167 WEST 89TH STREET									
NEW YORK, NY 10024	13-2685755	501 C (3)	21,200.	0.			GENERAL SUPPORT		
BALTIMORE ORIOLES FOUNDATION, INC.									
333 WEST CAMDEN ST BALTIMORE, MD 21201	52-6058645	501 C (3)	10,000.	0.			GENERAL SUPPORT		
BABIIMORE, MD 21201	32 0030043	501 € (3)	10,000.	· ·			GENERAL BOITORI		
BAPTIST HEALTH SOUTH FLORIDA									
FOUNDATION - 1575 SAN IGNACIO AVE									
FL 4, - CORAL GABLES, FL 33143	59-1923401	501 C (3)	241,823.	0.			GENERAL SUPPORT		
BAPTIST HEALTH SOUTH FLORIDA SUNSHINE FUND - 6855 RED ROAD -									
CORAL GABLES, FL 33143	65-0267668	501 C (3)	25,029.	0.			GENERAL SUPPORT		
	00 0207000		20,025.						
BARRY UNIVERSITY									
11300 NE 2ND AVENUE									
MIAMI SHORES, FL 33161	59-8993070	501 C (3)	55,564.	0.			GENERAL SUPPORT		
DAGGOND MENODIAL DROADGAGETYG									
BASCOMB MEMORIAL BROADCASTING (WDNA-FM) - 2921 CORAL WAY -									
MIAMI, FL 33145	23-7412945	501 C (3)	5,249.	0.			GENERAL SUPPORT		
		1 2 2 , 2 ,	1 2,213.						
BELAFONTE TACOLCY CENTER, INC.									
6161 NW 9TH AVE.									
MIAMI, FL 33127	59-1376077	501 C (3)	46,095.	0.			GENERAL SUPPORT		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</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			
BELEN JESUIT PREPARATORY SCHOOL, INC 500 S.W. 127TH AVENUE - MIAMI, FL 33184	59-1923401	501 C (3)	91,589.	0.			GENERAL SUPPORT			
BEST BUDDIES INTERNATIONAL, INC. 100 S.E. 2ND STREET MIAMI, FL 33131	52-1614576	501 C (3)	13,000.	0.			GENERAL SUPPORT			
BETH TORAH ADATH YESHURUN, INC. 20350 NE 26TH AVENUE NORTH MIAMI BEACH, FL 33180		501 C (3)	6,800.	0.			GENERAL SUPPORT			
BETHANY CHILD DEVELOPMENT CENTER 4400 NW 183 STREET MIAMI GARDENS, FL 33055		501 C (3)	29,943.	0.			GENERAL SUPPORT			
BIG BROTHERS BIG SISTERS OF GREATER MIAMI - 550 NW 42ND AVE - MIAMI, FL 33126	59-6166904	501 C (3)	235,329.	0.			GENERAL SUPPORT			
BIG BROTHERS BIG SISTERS OF METRO ATLANTA, INC 1382 PEACHTREE ST, NE - ATLANTA, GA 30309	58-0861895	501 C (3)	13,600.	0.			GENERAL SUPPORT			
BIG BROTHERS BIG SISTERS OF NEW YORK CITY, INC 40 RECTOR ST - NEW YORK, NY 10006	13-5600383	501 C (3)	12,550.	0.			GENERAL SUPPORT			
BIRTHRIGHT ISRAEL FOUNDATION 33 E 33RD ST FL 7 NEW YORK, NY 10016	13-4092050	501 C (3)	18,094.	0.			GENERAL SUPPORT			
B'NAI AVIV. INC. 1410 INDIAN TRCE WESTON, FL 33326	65-0096470	501 C (3)	6,862.	0.			GENERAL SUPPORT			

Schedule I (Form 990) UNITED WA	Y MIAMI I	INC.				5	59-0830840 Page 1			
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</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			
BOCA WEST COMMUNITY CHARITABLE FOUNDATION, INC 20583 BOCA WEST DR - BOCA RATON, FL 33434	27-3840788	501 C (3)	110,000.	0.			GENERAL SUPPORT			
BOSTON BAR FOUNDATION 16 BEACON STREET BOSTON, MA 02108	04-6111344	501 C (3)	21,294.	0.			GENERAL SUPPORT			
BOSTON UNIVERSITY HILLEL, INC. 213 BAY STATE RD	01 0111341	501 € (3)	21,234.				SANDAM BOTTON			
BOSTON, MA 02215	32-0293118	501 C (3)	10,000.	0.			GENERAL SUPPORT			
BOY SCOUTS OF AMERICA 1800 CIRCLE 75 PKWY SE ATLANTA, GA 30339	22-1576300	501 C (3)	10,000.	0.			GENERAL SUPPORT			
BOY SCOUTS OF AMERICA, SOUTH FLORIDA COUNCIL, INC 3301 SW 142ND AVE - DAVIE, FL 33330	59-0637817	501 C (3)	5,875.	0.			GENERAL SUPPORT			
BOYS & GIRLS CLUBS OF METRO ATLANTA - 1275 PEACHTREE ST NE - ATLANTA, GA 30309	58-0566123	501 C (3)	8,610.	0.			GENERAL SUPPORT			
BOYS & GIRLS CLUBS OF MIAMI-DADE, INC P.O. BOX 330219 - MIAMI, FL			,							
33233	59-0879227	501 C (3)	89,566.	0.			GENERAL SUPPORT			
BRANCHES, INC. 11500 NW 12TH AVE MIAMI, FL 33168	65-0716969	501 C (3)	590,175.	0.			GENERAL SUPPORT			
BREAKTHROUGH MIAMI, INC. 3250 SW THIRD AVE	06.043			_						
MIAMI, FL 33129	26-2105534	501 C (3)	204,341.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</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			
BRIGHT STEPS ACADEMY										
1827 WEST FLAGLER ST										
MIAMI, FL 33135	45-3831432	501 C (3)	313,079.	0.			GENERAL SUPPORT			
BRIGHTON CENTER										
14207 HIGGINS RD										
SAN ANTONIO, TX 78217	74-2331826	501 C (3)	22,000.	0.			GENERAL SUPPORT			
BROOKLYN BUREAU OF COMMUNITY										
SERVICE - 285 SCHERMERHOM ST -										
BROOKLYN, NY 11217	11-1630780	501 C (3)	21,800.	0.			GENERAL SUPPORT			
			22,000.	-						
BROPHY COLLEGE PREPARATORY										
4701 N CENTRAL AVENUE										
PHOENIX, AZ 85012	53-0196617	501 C (3)	6,280.	0.			GENERAL SUPPORT			
			·							
BROWARD COLLEGE FOUNDATION INC										
111 E LAS OLAS BLVD.										
FORT LAUDERDALE, FL 33301	23-7181959	501 C (3)	15,000.	0.			GENERAL SUPPORT			
CALHOUN SCHOOL, INC.										
433 W END AVE										
NEW YORK, NY 10024	13-1623919	501 C (3)	14,565.	0.			GENERAL SUPPORT			
CAMILLIE HOUSE INC										
CAMILLUS HOUSE, INC. 1603 NW 7TH AVE										
MIAMI, FL 33136	65-0032862	501 C (3)	29,165.	0.			GENERAL SUPPORT			
HAM1, FH 33130	03 0032002	501 C (3)	25,105.	0.			BENEKAL BUTTOKI			
CAMPOUT FOR KIDS										
1643 N MILWAUKEE AVE										
CHICAGO, IL 60647	26-3646306	501 C (3)	9,600.	0.			GENERAL SUPPORT			
			1							
CANCER WELLNESS CENTER										
215 REVERE DR										
NORTHBROOK, IL 60062	36-3604463	501 C (3)	8,000.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Assistance to Do			overnments (Sch	eddie 1 (FOITH 990), Fa	1	
(a) Name and address of organization or government	( <b>b)</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
ARE ELEMENTARY SCHOOL, INC.							
2025 NW 1ST ST							
MIAMI, FL 33127	46-5269625	501 C (3)	27,500.	0.			GENERAL SUPPORT
CARE RESOURCE							
3510 BISCAYNE BLVD							
MIAMI, FL 33137	59-2564198	501 C (3)	100,693.	0.			GENERAL SUPPORT
CARROLLTON SCHOOL OF THE SACRED							
HEART - 3747 MAIN HIGHWAY - MIAMI,							
FL 33133	59-6082015	501 C (3)	131,734.	0.			GENERAL SUPPORT
CASA FAMILIA, INC.							
1550 S DOUGLAS RD							
CORAL GABLES, FL 33134	47-4734481	501 C (3)	19,266.	0.			GENERAL SUPPORT
CARAL VOR MIANT INC							
CATALYST MIAMI, INC. 260 NE 17 TERRACE							
	65 0600360	E01 G (2)	100 050	0			CEMEDAL GUDDODE
MIAMI, FL 33132	65-0690368	501 C (3)	100,059.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES OF DALLAS, INC.							
1421 MOCKINGBIRD LN							
DALLAS, TX 75247	75-2745221	501 C (3)	13,500.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES OF THE							
ARCHDIOCESE OF MIAMI, INC 1505							
NE 26TH ST - WILTON MANORS, FL							
33305	59-1279497	501 C (3)	5,861.	0.			GENERAL SUPPORT
CATHOLIC HEALTH CARE FOUNDATION OF			<u> </u>				
THE ARCHDIOCESE OF NY - 205							
LEXINGTON AVE FL 2 - NEW YORK, NY							
10016	13-4054158	501 C (3)	7,308.	0.			GENERAL SUPPORT
CAYUGA HOME FOR CHILDREN (DBA							
CAYUGA CENTERS) - 101 HAMILTON							
AVENUE - AUBURN, NY 13021	15-0532087	ри1 С (3)	81,537.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI I	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	
(a) Name and address of organization or government	<b>(b)</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 CHILD DEVELOPMENT SERVICES							
970 SW 1ST ST							
MIAMI, FL 33130	59-1279497	501 C (3)	157,261.	0.			GENERAL SUPPORT
CC SERVICES FOR THE ELDERLY 9401 BISCAYNE BLVD.							
MIAMI, FL 33138	59-1279497	501 C (3)	71,667.	0.			GENERAL SUPPORT
CCDH, INC.							
7990 SW 117 AVENUE							
MIAMI, FL 33138	59-1617964	501 C (3)	50,026.	0.			GENERAL SUPPORT
CENTER FOR AMERICAN AND							
INTERNATIONAL LAW - 5201 DEMOCRACY							
DR - PLANO, TX 75024	75-6012849	501 C (3)	14,350.	0.			GENERAL SUPPORT
CENTER FOR FAMILY AND CHILD							
ENRICHMENT - 1825 N.W. 167TH ST -							
MIAMI GARDENS, FL 33056	59-1775062	501 C (3)	70,629.	0.			GENERAL SUPPORT
CENTER FOR URBAN COMMUNITY							
SERVICES, INC 198 E 121ST ST -							
NEW YORK, NY 10035	13-3687891	501 C (3)	25,000.	0.			GENERAL SUPPORT
CENTER OF HOPE HAITI, INC.							
PO BOX 150							
STAMFORD, CT 06904	20-1002278	501 C (3)	23,800.	0.			GENERAL SUPPORT
CENTRO CAMPESINO FARMWORKER CENTER							
P.O. BOX 343449							
HOMESTEAD, FL 33034	59-1460598	501 C (3)	162,358.	0.			GENERAL SUPPORT
CENTRO MATER CHILD CARE SERVICES,							
INC 8298 NW 103RD STREET -							
HIALEAH GARDENS, FL 33016	20-8083301	501 C (3)	175,240.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-08308 <b>4</b> 0 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa I	ırt II.) T	1
(a) Name and address of organization or government	<b>(b)</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)	139,111.	0.			GENERAL SUPPORT
CHICAGO COMMONS ASSOCIATION 515 E 50TH ST							
CHICAGO, IL 60615	36-2169136	501 C (3)	5,500.	0.			GENERAL SUPPORT
CHILD MIND INSTITUTE, INC. 445 PARK AVE							
NEW YORK, NY 10022	80-0478843	501 C (3)	12,380.	0.			GENERAL SUPPORT
CHILDREN'S BEREAVEMENT CENTER, INC 6619 SOUTH DIXIE HWY -							
SOUTH MIAMI, FL 33143	65-0918564	501 C (3)	33,280.	0.			GENERAL SUPPORT
CHILDREN'S HEALTHCARE OF ATLANTA FOUNDATION, INC 1577 NE							
EXPRESSWAY - ATLANTA, FL 30329	58-1710601	501 C (3)	18,200.	0.			GENERAL SUPPORT
CHILDREN'S HOME SOCIETY OF FLORIDA, - 5768 SOUTH SEMORAN BLVD							
- ORLANDO, FL 32822	59-0192430	501 C (3)	30,000.	0.			GENERAL SUPPORT
CHILDREN'S HOME SOCIETY OF FLORIDA, SOUTHEASTERN DIVISION - 800 NW 15TH STREET - MIAMI, FL							
33136	59-0192430	501 C (3)	72,317.	0.			GENERAL SUPPORT
CHILDREN'S HOSPITAL FOUNDATION							
SILVER SPRING, MD 20910	52-1640402	501 C (3)	8,500.	0.			GENERAL SUPPORT
CHIPS NETWORK, INC.							
SAN FRANCISCO, CA 94107	46-1198117	501 C (3)	50,125.	0.			GENERAL SUPPORT

	AY MIAMI	INC.				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to De	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa I	ırt II.) T	1
(a) Name and address of organization or government	<b>(b)</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
CHOC FOUNDATION							
1201 W LA VETA AVE							
ORANGE, CA 92868	95-6097416	501 C (3)	20,500.	0.			GENERAL SUPPORT
CHRISTOPHER COLUMBUS HIGH SCHOOL							
3000 SW 87TH AVE.							
MIAMI, FL 33165	59-0855391	501 C (3)	26,290.	0.			GENERAL SUPPORT
CHURCH OF THE EPIPHANY							
8081 S.W. 54TH COURT							
MIAMI, FL 33143	59-0711166	501 C (3)	5,843.	0.			GENERAL SUPPORT
CITIZENS BUDGET COMMISSION							
2 PENN PLZ FL 5							
NEW YORK, NY 10121	13-0576141	501 C (3)	18,330.	0.			GENERAL SUPPORT
CITIZENS COMMITTEE FOR NEW YORK							
CITY, INC 77 WATER ST - NEW							
YORK, NY 10005	51-0171818	501 C (3)	8,800.	0.			GENERAL SUPPORT
CITRUS HEALTH NETWORK, INC.							
4175 WEST 20TH AVENUE		504 5 (2)	100 040				
HIALEAH, FL 33012	59-1865751	501 C (3)	129,248.	0.			GENERAL SUPPORT
CITY OF HOPE							
1500 E DUARTE RD							
DUARTE, CA 91010	95-3435919	501 C (3)	78,800.	0.			GENERAL SUPPORT
CITY YEAR, INC.							
44 W FLAGLER ST.	22 2882540	E01 C (2)	E0 000	0			CENEDAL GIDDODE
MIAMI, FL 33130	22-2882549	501 C (3)	50,000.	0.			GENERAL SUPPORT
CLEVELAND CLINIC FLORIDA							
2950 CLEVELAND CLINIC BLVD							
WESTON, FL 33331	34-0714585	501 C (3)	13,200.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	( <b>b)</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
COCONUT GROVE CARES, INC. 3870 WASHINGTON AVE.	E0 1262024	E01 G (3)	02.000	0			GENERAL GURDORE
COCONUT GROVE, FL 33133  COLEL CHABAD, INC. 806 EASTERN PARKWAY	59-1263934	501 C (3)	92,880.	0.			GENERAL SUPPORT
BROOKLYN, NY 11213	11-3254483	501 C (3)	9,000.	0.			GENERAL SUPPORT
COLORADO OPEN GOLF FOUNDATION 20309 E 48TH PL							
DENVER, CO 80249	20-0377476	501 C (3)	30,120.	0.			GENERAL SUPPORT
COLUMBIA BARNARD HILLEL, INC. 606 W 115TH ST							
NEW YORK, NY 10025	23-7077182	501 C (3)	20,000.	0.			GENERAL SUPPORT
COMMITTEE OF SEVENTY 123 S BROAD ST	02.0405005	501 (2.72)	10.000				
PHILADELPHIA, PA 19109	23-0487205	501 C (3)	12,000.	0.			GENERAL SUPPORT
COMMON THREADS 3811 BEE CAVE RD	20-0106847	501 C (3)	02 410	0.			GENERAL SUPPORT
AUSTIN, TX 78746	20-0100047	501 C (3)	92,419.	0.			GENERAL SUPPORT
COMMUNITY CHILD CARE CENTER OF DELRAY FOUNDATION, INC 555 NW							
4TH ST - DELRAY BEACH, FL 33444	65-1023099	501 C (3)	15,000.	0.			GENERAL SUPPORT
COMMUNITY HEALTH OF SOUTH FLORIDA, INC 10300 S.W. 216TH ST -							
MIAMI, FL 33190	59-1372690	501 C (3)	13,500.	0.			GENERAL SUPPORT
COMMUNITY SMILES AKA DADE COUNTY DENTAL - 750 NW 20TH STREET -							
MIAMI, FL 33127	23-7372819	501 C (3)	69,978.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	( <b>b)</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	<b>(h)</b> Purpose of grant or assistance			
COPA HEALTH, INC. 924 N COUNTRY CLUB DR.										
MESA, AZ 85201	84-4608444	501 C (3)	9,323.	0.			GENERAL SUPPORT			
CORE COMMUNITY ORGANIZED RELIEF EFFORT - 6464 SUNSET BLVD STE 530										
- LOS ANGELES, CA 90028	27-1703237	501 C (3)	23,000.	0.			GENERAL SUPPORT			
CORPUS CHRISTI CATHOLIC CHURCH 3220 NW 7TH AVE										
MIAMI, FL 33127	53-0196617	501 C (3)	7,981.	0.			GENERAL SUPPORT			
COUNCIL ON THE ENVIRONMENT, INC. 100 GOLD ST										
NEW YORK, NY 10038	13-2765465	501 C (3)	23,750.	0.			GENERAL SUPPORT			
COVENANT HOUSE GEORGIA, INC. 1559 JOHNSON RD NW										
ATLANTA, GA 30318	13-3523561	501 C (3)	13,920.	0.			GENERAL SUPPORT			
CREATIVE ARTS WORKSHOPS FOR KIDS, INC 520 8TH AVE - NEW YORK, NY										
10018	13-3638436	501 C (3)	14,600.	0.			GENERAL SUPPORT			
CROHN'S & COLITIS FOUNDATION OF AMERICA FLORIDA CHAPTER - 21301 POWERLINE ROAD - BOCA RATON, FL										
33434	13-6193105	501 C (3)	46,123.	0.			GENERAL SUPPORT			
CUBAN AMERICAN BAR FOUNDATION, INC 201 ALHAMBRA CIR - CORAL										
GABLES, FL 33134	83-0397116	501 C (3)	7,490.	0.			GENERAL SUPPORT			
CUBAN AMERICAN NATIONAL COUNCIL, INC 1223 S.W. 4TH STREET -										
MIAMI, FL 33135	23-7269955	501 C (3)	27,500.	0.			GENERAL SUPPORT			

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt 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	<b>(h)</b> Purpose of grant or assistance
CURE CHILDHOOD CANCER, INC.							
200 ASHFORD CTR NORTH							
ATLANTA, GA 30338	58-1244138	501 C (3)	8,200.	0.			GENERAL SUPPORT
·							
CYSTIC FIBROSIS FOUNDATION,							
GEORGIA CHAPTER - 57 EXECUTIVE							
PARK S - ATLANTA, GA 30329	13-1930701	501 C (3)	10,000.	0.			GENERAL SUPPORT
DADE GOLDEN AGGOGLATION OF							
DADE COUNTY ASSOCIATION OF							
FIREFIGHTERS CHARITIES, INC 8000 NW 21ST ST - DORAL, FL 33122	65-0056215	501 C (3)	10,567.	0.			GENERAL SUPPORT
0000 NW 2151 51 - DORAL, FL 33122	03-0030213	501 C (3)	10,567.	0.			GENERAL SUPPORT
DALLAS CASA							
2757 SWISS AVE							
DALLAS, TX 75204	75-1866204	501 C (3)	21,214.	0.			GENERAL SUPPORT
•			,				
DANIEL'S MUSIC FOUNDATION							
1595 LEXINGTON AVE							
NEW YORK, NY 10029	32-0156199	501 C (3)	10,000.	0.			GENERAL SUPPORT
DAVE AND MARY ALPER JCC							
11155 S.W. 112 AVENUE							
MIAMI, FL 33176	59-2736411	501 C (3)	28,684.	0.			GENERAL SUPPORT
DAVE THOMAS FOUNDATION FOR							
ADOPTION - 716 MT. AIRYSHIRE BLVD							
- COLUMBUS, OH 43235	31-1356151	501 C (3)	6,625.	0.			GENERAL SUPPORT
COHOMBOD, ON 43233	31 1330131	301 C (3)	0,023.	<u> </u>			CHARLES COLLOKI
DELIVERING GOOD, INC.							
266 W 37TH ST							
NEW YORK, NY 10018	13-3300271	501 C (3)	10,000.	0.			GENERAL SUPPORT
DIABETES RESEARCH INSTITUTE							
FOUNDATION, INC. DRI - 200 S PARK							
RD - HOLLYWOOD, FL 33021	59-1361955	501 C (3)	206,729.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(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
IGESTIVE HEALTH FOUNDATION							
51 E HURON ST							
CHICAGO, IL 60611	47-4178944	501 C (3)	7,250.	0.			GENERAL SUPPORT
DIRK NOWITZKI FOUNDATION							
949 SHERRY LANE							
DALLAS, TX 75225	90-0036829	501 C (3)	12,000.	0.			GENERAL SUPPORT
DOUGLAS GARDENS COMMUNITY MENTAL							
IEALTH CENTER - 701 BRICKELL AVE -							
MIAMI, FL 33131	59-1923396	501 C (3)	54,559.	0.			GENERAL SUPPORT
ASTER SEALS GREATER WASHINGTON							
.420 SPRING ST							
SILVER SPRINGS, MD 20910	53-0212296	501 C (3)	32,500.	0.			GENERAL SUPPORT
SINVER BIRINGS, MS 20910	33 0212230	501 6 (3)	32,300.	<u> </u>			SHARINI BOTTOKT
EASTER SEALS SOUTH FLORIDA, INC.							
475 NW 14TH AVE							
IIAMI, FL 33125	59-0722783	501 C (3)	700,121.	0.			GENERAL SUPPORT
CONOMIC DEVELOPMENT CORPORATION							
F LOS ANGELES COUNTY - 444 S							
LOWER ST FL 37 - LOS ANGELES, CA							
0071	95-3643339	501 C (3)	11,600.	0.			GENERAL SUPPORT
EDGEWOOD DANGU ENDOWMENT INC							
DGEWOOD RANCH ENDOWMENT, INC. 451 EDGEWOOD RANCH RD							
PRLANDO, FL 32835	59-3080606	501 C (3)	7,500.	0.			GENERAL SUPPORT
RIANDO, FE 32033	33-300000	501 C (3)	7,300.	0.			GENERAL SUFFORT
DUCATE TOMORROW, CORP.							
717 N. BAYSHORE DR.							
IIAMI, FL 33132	51-0493526	501 C (3)	9,600.	0.			GENERAL SUPPORT
DWARD M. KENNEDY INSTITUTE							
210 MORRISSEY BLVD COLUMBIA POINT	0.0000000	F01 G (3)	0.000				
BOSTON, MA 02125	27-0963869	DUI C (3)	8,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	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	<b>(h)</b> Purpose of grant or assistance
PILEPSY FLORIDA, INC.							
7300 N KENDALL DR							
MIAMI, FL 33156	59-2164525	501 C (3)	70,475.	0.			GENERAL SUPPORT
EPIPHANY CATHOLIC SCHOOL & CHURCH							
3081 s.w. 54TH COURT							
MIAMI, FL 33143	53-0196617	501 C (3)	5,492.	0.			GENERAL SUPPORT
EQUALITY CALIFORNIA INSTITUTE							
3701 WILSHIRE BLVD							
LOS ANGELES, CA 90010	68-0438008	501 C (3)	30,705.	0.			GENERAL SUPPORT
ESPERANZA MINISTRIES DBA CASA DEL							
LAGO - P.O. BOX 540342 - DALLAS,							
TX 75354	38-3934583	501 C (3)	9,840.	0.			GENERAL SUPPORT
EXPANDED SCHOOLS							
1440 BROADWAY NEW YORK, NY 10018	13-4004600	501 C (3)	10,853.	0.			GENERAL SUPPORT
NEW TORK, NI 10010	13-4004000	501 C (3)	10,033.	<u> </u>			GENERAL SUFFORT
F K A THE BOCUSE D'OR USA							
FOUNDATION LTD DBA MENT'OR LTD -							
16 E 40TH ST - NEW YORK, NY 10016	26-2447984	501 C (3)	28,500.	0.			GENERAL SUPPORT
FACTS ABOUT CUBAN EXILES - FACE							
9521 SW 103RD ST							
MIAMI, FL 33176	52-2189464	501 C (3)	8,750.	0.			GENERAL SUPPORT
FAIRCHILD TROPICAL BOTANIC GARDEN							
10901 OLD CUTLER RD	E0 0660400	E01 G (3)	6 301	_			CENEDAL GUDDODE
CORAL GABLES, FL 33156	59-0668480	501 C (3)	6,321.	0.			GENERAL SUPPORT
FAMILY EQUALITY COUNCIL							
41 WINTER STREET							
BOSTON, MA 02108	52-1438455	501 C (3)	15,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</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	<b>(h)</b> Purpose of grant or assistance		
FAMILY PROMISE OF MORRIS COUNTY, INC P.O. BOX 1494 - MORRISTOWN, NJ 07962	52-1572014	501 C (3)	24,650.	0.			GENERAL SUPPORT		
FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC 155 S MIAMI AVE - MIAMI, FL 33130	59-1788265	501 C (3)	81,415.	0.			GENERAL SUPPORT		
FEDERALIST SOCIETY FOR LAW & PUBLIC POLICY STUDIES - 1776 I ST, NW - WASHINGTON, DC 20006	36-3235550	501 C (3)	30,000.	0.			GENERAL SUPPORT		
FEEDING SOUTH FLORIDA 2501 SW 32 TERRACE PEMBROKE PNES, FL 33023	59-2097520	501 C (3)	78,396.	0.			GENERAL SUPPORT		
FIREFIGHTER CANCER SUPPORT NETWORK 2600 W OLIVE AVE BURBANK, CA 91505	20-4192265	501 C (3)	7,815.	0.			GENERAL SUPPORT		
FLORIDA ATLANTIC UNIVERSITY FOUNDATION - P.O. BOX 3091 - BOCA RATON, FL 33431	59-0917284	501 C (3)	86,000.	0.			GENERAL SUPPORT		
FLORIDA GRAND OPERA, INC. 8390 NW 25 ST. MIAMI, FL 33122	65-0496477	501 C (3)	91,000.	0.			GENERAL SUPPORT		
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC 11200 SW 8TH STREET - MIAMI, FL 33199	23-7047106	501 C (3)	125,657.	0.			GENERAL SUPPORT		
FLORIDA STATE UNIVERSITY FOUNDATION, INC 325 W COLLEGE AVE - TALLAHASSEE, FL 32301	59-6152180	501 C (3)	10,076.	0.			GENERAL SUPPORT		

Page 1 Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) FLORIDA TAXWATCH, INC. 106 N BRONOUGH ST TALLAHASSEE, FL 32301 59-1918055 501 C (3) 10,000 0 GENERAL SUPPORT FLORIDA-BAHAMAS SYNOD OF THE EVANGELICAL - 3838 W CYPRESS STREET - TAMPA, FL 33607 41-1568278 501 C (3) 10,000 0 GENERAL SUPPORT FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD. MIAMI, FL 33137 65-0118944 501 C (3) 66,547 0 GENERAL SUPPORT FRENCH-AMERICAN FOUNDATION 28 W 44TH ST NEW YORK, NY 10036 13-2847092 501 C (3) 22,000 0 GENERAL SUPPORT FRESH START WOMEN'S FOUNDATION 1130 EAST MCDOWELL ROAD PHOENIX, AZ 85006 GENERAL SUPPORT 86-0762610 501 C (3) 15,000 0 FRIENDS OF MIAMI ANIMALS FOUNDATION, INC. - 2665 S BAYSHORE 501 C (3) DR - MIAMI, FL 33133 GENERAL SUPPORT 81-4578892 9,000 0 FRIENDS OF MORSELIFE, INC. 4847 DAVID S MACK DR WEST PALM BEACH, FL 33417 65-0329966 501 C (3) 10 000 0 GENERAL SUPPORT FRIENDS OF THE ISRAEL DEFENSE FORCES - 60 E 42ND ST - NEW YORK NY 10165 13-3156445 501 C (3) 16,400 0 GENERAL SUPPORT FRIENDS OF THE ISRAEL DEFENSE FORCES - 2040 NE 163RD ST STE 207 - NORTH MIAMI BEACH, FL 33162 13-3156445 501 C (3) 0 GENERAL SUPPORT 31,470

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	( <b>b)</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
FRIENDS OF THE UNDERLINE, INC.							
1172 S DIXIE HWY							
CORAL GABLES, FL 33146	46-4028150	501 C (3)	22,600.	0.			GENERAL SUPPORT
FRIENDS OF WLRN, INC.							
172 NE 15TH ST							
MIAMI, FL 33132	23-7365001	501 C (3)	5,710.	0.			GENERAL SUPPORT
FRIENDSHIP CIRCLE NEW JERSEY, INC. 10 MICROLAB RD							
LIVINGSTON, NJ 07039	46-3008950	501 C (3)	17,100.	0.			GENERAL SUPPORT
,		, , ,					
FRIENDSHIP CIRCLE OF MIAMI, INC.							
8700 SW 112ST MIAMI, FL 33176	20-5467741	501 C (3)	32,012.	0.			GENERAL SUPPORT
MIAMI, FI 33170	20-3407741	501 C (3)	32,012.	0.			GENERAL SUFFORT
FUND FOR MODERN COURTS, INC.							
28 W 39TH ST NEW YORK, NY 10018	13-2597816	501 C (3)	21,770.	0.			GENERAL SUPPORT
NEW TORK, NI 10010	13 2337010	501 € (3)	21,770.	· ·			GENERAL BUTTORT
FUND FOR THE AGED, INC.							
120 W 106TH ST							
NEW YORK, NY 10025	13-3603516	501 C (3)	5,650.	0.			GENERAL SUPPORT
G1D1 D6D1 G7 T1/G							
GABLESTAGE, INC. 1200 ANASTASIA AVENUE							
CORAL GABLES, FL 33134	59-1972774	501 C (3)	6,000.	0.			GENERAL SUPPORT
COMME GREEN, TH SSIST	33 1371771	301 0 (3)	3,000.				DINIMI BOTTONI
GAINESVILLE HILLEL, INC							
2020 W UNIVERSITY AVE							
GAINESVILLE, FL 32603	52-1844823	501 C (3)	11,000.	0.			GENERAL SUPPORT
albib pomp							
GAPABA LAW FOUNDATION, INC. 483 WALDO ST SE							
ATLANTA, GA 30312	20-2369818	501 C (3)	6,450.	0.			GENERAL SUPPORT
	1 20 2303010	P = (3)	1 0, 430.	<u> </u>	<u> </u>		Panana Borroki

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
CARDEN OF PREAMS FOUNDAMEN							
GARDEN OF DREAMS FOUNDATION							
2 PENN PLAZA NEW YORK, NY 10121	13-3979726	501 C (3)	50,000.	0.			GENERAL SUPPORT
GEORGE WEST MENTAL HEALTH	13 3373720	501 C (5)	30,000.	•			BENERAL BUTTORT
FOUNDATION, INC. DBA SKYLAND TRAIL							
- 1961 N DRUID HILLS RD, NE -							
ATLANTA, GA 30329	58-1489941	501 C (3)	10,500.	0.			GENERAL SUPPORT
			,				
GEORGIA ASYLUM & IMMIGRATION							
NETWORK - P.O. BOX 78425 -							
ATLANTA, GA 30357	26-1733523	501 C (3)	9,400.	0.			GENERAL SUPPORT
GEORGIA HISPANIC CHAMBER OF							
COMMERCE BUS. DEVELOPMENT CENTER -							
270 PEACHTREE ST, NW - ATLANTA, GA							
30303	03-0427706	501 C (3)	11,625.	0.			GENERAL SUPPORT
GIFT OF LIFE MARROW REGISTRY, INC.							
5901 BROKEN SOUND PKWY NW							
BOCA RATON, FL 33487	22-3131232	501 C (3)	7,080.	0.			GENERAL SUPPORT
GIRL POWER ROCKS, INC.							
1600 NW 3RD AVE STE 100	CE 0727640	E01 G (2)	07.010				GUNDAL GUDDADE
MIAMI, FL 33136	65-0737649	501 C (3)	87,818.	0.			GENERAL SUPPORT
GIRL SCOUT COUNCIL OF TROPICAL							
FLORIDA, INC 11347 S.W. 160TH STREET - MIAMI, FL 33157	59-0651087	501 C (3)	126,583.	0.			GENERAL SUPPORT
SIREEI - MIAMI, FE 33137	39-0031007	501 C (3)	120,303.	0.			GENERAL SUFFORT
GLAD ED SOLUTIONS							
3250 SW 3RD AVE #305							
MIAMI, FL 33129	59-3559041	501 C (3)	28,934.	0.			GENERAL SUPPORT
		(-)		-		1	
GLAMOURGALS FOUNDATION, INC.							
PO BOX 20488							
NEW YORK, NY 10021	01-0565218	501 C (3)	118,500.	0.			GENERAL SUPPORT

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Schedule I (Form 990) UNITED WA							9-0830840 Pag
Part II Continuation of Grants and Other	Assistance to De	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	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
GLOBAL GAMING WOMEN CHARITABLE							
EDUCATION FUND - 6841 S EASTERN							
LVE - LAS VEGAS, NV 89119	33-1123741	501 C (3)	17,500.	0.			GENERAL SUPPORT
GOOD SPORTS, INC							
.515 HANCOCK STREET							
QUINCY, MA 02169	75-3138664	501 C (3)	12,664.	0.			GENERAL SUPPORT
GOOD360							
575 N WASHINGTON							
ALEXANDRIA, VA 22314	54-1282616	501 C (3)	50,626.	0.			GENERAL SUPPORT
·							
OODWILL INDUSTRIES OF CENTRAL							
ARIZONA, INC 2626 W BERYL AVE -							
HOENIX, AZ 85021	86-0104415	501 C (3)	17,500.	0.			GENERAL SUPPORT
GOODWILL INDUSTRIES OF SOUTH							
FLORIDA, INC 2121 N.W. 21							
STREET - MIAMI, FL 33142	59-0866126	501 C (3)	361,164.	0.			GENERAL SUPPORT
, , , , , , , , , , , , , , , , , , ,	33 0000120	301 0 (3)	301,101.	<u> </u>			DENEMED BOTTON
GRAND CENTRAL PARTNERSHIP, INC							
22 E 42ND ST							
EW YORK, NY 10168	13-3275810	501 C (3)	9,250.	0.			GENERAL SUPPORT
GRATEFUL AMERICANS CHARITY							
28725 ROBINSON RD							
CONROE, TX 77385	82-0598762	501 C (3)	6,068.	0.			GENERAL SUPPORT
,							
REATER JAMAICA DEVELOPMENT							
CORPORATION 9004 161ST ST -							
AMICA, NY 11432	23-7021273	501 C (3)	10,000.	0.			GENERAL SUPPORT
GREATER LOVE DAY CARE, INC. TOTAL							
.214 NW 9TH AVE.							
CLORIDA CITY, FL 33034	04-3721495	501 C (3)	14,517.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	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	<b>(h)</b> Purpose of grant or assistance
REATER MIAMI HILLEL FOUNDATION							
L100 STANFORD DR							
CORAL GABLES, FL 33146	52-1844823	501 C (3)	53,316.	0.			GENERAL SUPPORT
GREATER MIAMI JEWISH FEDERATION							
1200 BISCAYNE BLVD.							
MIAMI, FL 33137	59-0624404	501 C (3)	2,775,837.	0.			GENERAL SUPPORT
GREATER MIAMI SERVICE CORPS							
810 NW 28TH ST							
MIAMI, FL 33127	65-0221820	501 C (3)	25,473.	0.			GENERAL SUPPORT
GREATER MIAMI YOUTH FOR CHRIST							
9350 SW 79TH AVE							
MIAMI, FL 33156	59-6033466	501 C (3)	9,824.	0.			GENERAL SUPPORT
GROUNDWORK GROUP							
445 HUTCHINSON AVE							
COLUMBUS, OH 43235	59-3808297	501 C (3)	25,000.	0.			GENERAL SUPPORT
CHITTADE OVER CHINE ORGANIZATION							
GUITARS OVER GUNS ORGANIZATION, INC 169 E FLAGLER ST - MIAMI,							
FL 33131	26-2644682	501 C (3)	33,333.	0.			GENERAL SUPPORT
			,				
GULF COAST JUNIOR GOLF TOUR, INC							
1370 CREEKSIDE BLVD							
NAPLES, FL 34108	65-0477835	501 C (3)	17,500.	0.			GENERAL SUPPORT
GULLIVER SCHOOLS, INC.							
9350 S DIXIE HWY							
MIAMI, FL 33156	65-0900712	501 C (3)	9,000.	0.			GENERAL SUPPORT
HAPPINESS IS CAMPING							
52 SUNSET LAKE RD							
BLAIRSTOWN, NJ 07825	13-2556242	501 C (3)	12,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	Г
(a) Name and address of organization or government	<b>(b)</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	<b>(h)</b> Purpose of grant or assistance
HAPPY SPACES, INC.							
11820 SW 92ND AVE							
MIAMI, FL 33176	81-2897081	501 C (3)	5,126.	0.			GENERAL SUPPORT
HEALTH INFORMATION PROJECT, INC.							
4601 PONCE DE LEON BLVD.							
CORAL GABLES, FL 33146	80-0526558	501 C (3)	30,000.	0.			GENERAL SUPPORT
HEALTHY START COALITION OF							
MIAMI-DADE - 7205 NW 19TH STREET -							
MIAMI, FL 33125	65-1102736	501 C (3)	53,205.	0.			GENERAL SUPPORT
HEADING AND SDEECH SENMED OF							
HEARING AND SPEECH CENTER OF FLORIDA, INC 9425 SW 72ND							
STREET - MIAMI, FL 33173	59-0668488	501 C (3)	168,506.	0.			GENERAL SUPPORT
		001 0 (0)	100,000.				
HEARTLAND ALLIANCE FOR HUMAN NEEDS							
& HUMAN RIGHTS - 208 S LA SALLE ST							
- CHICAGO, IL 60604	36-1877640	501 C (3)	9,300.	0.			GENERAL SUPPORT
HENDY W. CDARY POUNDAUTON INC							
HENRY W. GRADY FOUNDATION, INC. 191 PEACHTREE ST, NE							
ATLANTA, GA 30303	58-2130437	501 C (3)	23,601.	0.			GENERAL SUPPORT
,			22,332.				
HFS CHICAGO SCHOLARS							
1074 W TAYLOR ST							
CHICAGO, IL 60607	36-3922345	501 C (3)	10,000.	0.			GENERAL SUPPORT
HIS HOUSE CHILDREN'S HOME							
20000 N.W. 47TH AVENUE							
MIAMI, FL 33055	65-0145994	501 C (3)	31,796.	0.			GENERAL SUPPORT
•		<u> </u>	, , , ,	•			
HISTORICAL SOCIETY OF THE NEW YORK							
COURTS - 140 GRAND ST - WHITE							
PLAINS, NY 10601	82-0554364	501 C (3)	16,300.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	The stic Organization		Overnments (Sch	l	1	ı
(a) Name and address of organization or government	( <b>b)</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
OSPICE OF PALM BEACH COUNTY, INC.							
5300 EAST AVE							
WEST PALM BEACH, FL 33407	59-1825937	501 C (3)	7,500.	0.			GENERAL SUPPORT
HOSPITALITY COMMITTEE FOR UNITED							
NATIONS DELEGATIONS, INC PO BOX							
1201 - NEW YORK, NY 10163	13-6017810	501 C (3)	6,500.	0.			GENERAL SUPPORT
HOUSTON LIVESTOCK SHOW AND RODEO,							
INC 8334 FANNIN ST - HOUSTON,							
TX 77054	74-1142851	501 C (3)	10,000.	0.			GENERAL SUPPORT
HOUSTON TEXAS EXES, INC.							
PO BOX 271648	76 0424006	E01 G (2)	9 000	0			GENERAL GURRORM
HOUSTON, TX 77277	76-0424906	501 C (3)	8,000.	0.			GENERAL SUPPORT
HUMAN OPTIONS, INC							
5540 TRABUCO RD							
IRVINE, CA 92620	95-3667817	501 C (3)	31,500.	0.			GENERAL SUPPORT
WWW DIGWES BIDGE							
HUMAN RIGHTS FIRST 75 BROAD ST							
NEW YORK, NY 10004	13-3116646	501 C (3)	22,350.	0.			GENERAL SUPPORT
MIN TORK, NI 10004	13 3110040	501 6 (5)	22,330.				SHARKED BOTTOKT
HUMAN RIGHTS WATCH, INC.							
350 5TH AVE							
NEW YORK, NY 10118	13-2875808	501 C (3)	25,000.	0.			GENERAL SUPPORT
HUMAN SERVICES COUNCIL OF NEW YORK							
130 E 59TH ST	12 2620052	E01 G (3)	10.000	_			GENERAL GURRORE
NEW YORK, NY 10022	13-3620059	501 C (3)	10,000.	0.			GENERAL SUPPORT
HUMANE SOCIETY OF GREATER MIAMI &							
ADOPT A PET - 16101 W DIXIE HWY -							
NORTH MIAMI BEACH, FL 33160	59-0711176	501 C (3)	5,450.	0.			GENERAL SUPPORT

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Schedule I (Form 990) UNITED WA	Y MIAMI I	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	<b>(b)</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
I HAVE A DREAM FOUNDATION OF MIAMI, INC 4000 ISLAND BLVD AVENTURA, FL 33160	65-0570404	501 C (3)	8,400.	0.			GENERAL SUPPORT
ICU BABY, INC. 88 W. MCINTYRE STREET KEY BISCAYNE, FL 33149	83-0693300	501 C (3)	23,333.	0.			GENERAL SUPPORT
ILLINOIS LEGAL AID ONLINE 17 N STATE ST							
CHICAGO, IL 60602	20-2917133	501 C (3)	13,200.	0.			GENERAL SUPPORT
INDEPENDENCE LANDING, INC. 2910 KERRY FOREST PKWY TALLAHASSEE, FL 32309	82-2792376	501 C (3)	10,000.	0.			GENERAL SUPPORT
INSTITUTE FOR CHILD AND FAMILY HEALTH, INC 15490 N.W. 7TH AVE - MIAMI, FL 33169	59-0866060	501 C (3)	27,179.	0.			GENERAL SUPPORT
INSTITUTE FOR INCLUSION IN THE LEGAL PROFESSION - 321 S PLYMOUTH CT - CHICAGO, IL 60604	27-0888460	501 C (3)	10,000.	0.			GENERAL SUPPORT
INSTITUTE OF CONTEMPORARY ART MIAMI - 61 NE 41ST ST - MIAMI, FL							
33137	47-1251523	501 C (3)	104,050.	0.			GENERAL SUPPORT
INSURANCE INDUSTRY CHARITABLE FOUNDATION - 1999 AVE OF THE STARS - LOS ANGELES, CA 90067	20-1240972	501 C (3)	10,380.	0.			GENERAL SUPPORT
INTERNATIONAL COMMITTEE OF THE RED CROSS - 1100 CONNECTICUT AVE NW - WASHINGTON, DC 20036	98-6001029	501 C (3)	43,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other				,	, ,,	, 	
(a) Name and address of organization or government	<b>(b)</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
NTERNATIONAL INSTITUTE FOR							
CONFLICT PREVENTION AND RESOLUTI -							
0 E 33RD ST - NEW YOURK, NY 10016	13-2885302	501 C (3)	16,180.	0.			GENERAL SUPPORT
NTERNATIONAL JUSTICE MISSION							
O.O. BIOX 58147							
ASHINGTON, DC 20037	54-1722887	501 C (3)	11,820.	0.			GENERAL SUPPORT
JACK AND JILL CHILDREN'S CENTER,							
NC 1315 W. BROWARD BLVD FT							
LAUDERDALE, FL 33311	59-0637870	501 C (3)	75,000.	0.			GENERAL SUPPORT
IACKGON HEALMH BOUNDAMION ING							
ACKSON HEALTH FOUNDATION, INC. 501 NW NORTH RIVER DR							
MIAMI, FL 33125	65-0077727	501 C (3)	49,264.	0.			GENERAL SUPPORT
AIIMI, II 33123	03 0077727	501 6 (3)	13,201.	<u> </u>			SHARKIN BOTTOKI
JEWISH COMMUNITY ACTION							
2324 UNIVERSITY AVE W							
SAINT PAUL, MN 55114	41-1830619	501 C (3)	7,500.	0.			GENERAL SUPPORT
JEWISH COMMUNITY RELATIONS COUNCIL							
OF NEW YORK - 700 W 36TH ST - NEW							
ORK, NY 10018	13-2869041	501 C (3)	8,210.	0.			GENERAL SUPPORT
,			,				
TEWISH COMMUNITY SERVICES OF SOUTH							
FLORIDA, INC 12000 BISCAYNE							
BLVD - NORTH MIAMI, FL 33181	59-0637867	501 C (3)	1,072,043.	0.			GENERAL SUPPORT
TEWISH EDUCATIONAL LOAN FUND, INC.							
549 CHAMBLEE DUNWOODY RD							
ATLANTA, GA 30324	58-0568686	501 C (3)	10,000.	0.			GENERAL SUPPORT
-							
TEWISH FEDERATION COUNCIL OF GTR.							
OS ANGELES - 6505 WILSHIRE BLVD.							
LOS ANGELES, CA 90048	95-1643388	501 C (3)	70,000.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	chedule I (Form 990) UNITED WAY MIAMI INC.							
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)		
(a) Name and address of organization or government	( <b>b)</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 SUPPORT	
JEWISH FEDERATION OF GREATER ATLANTA - 1440 SPRING ST NW, - ATLANTA, GA 30309	58-1021791	501 C (3)	13,000.	0.			GENERAL SUPPORT	
JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY - 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428	59-1945109	501 C (3)	50,000.	0.			GENERAL SUPPORT	
JEWISH MUSEUM OF FLORIDA 301 WASHINGTON AVE. MIAMI BEACH, FL 33139	23-7047106	501 C (3)	16,992.	0.			GENERAL SUPPORT	
JEWISH NATIONAL FUND - NEW YORK 42 E 69TH ST NEW YORK, NY 10021	13-1659627	501 C (3)	13,000.	0.			GENERAL SUPPORT	
JEWISH UNITED FUND OF METROPOLITAN CHICAGO - 30 S WELLS ST - CHICAGO, IL 60606	36-2167034	501 C (3)	75,000.	0.			GENERAL SUPPORT	
JOHN BUCK COMPANY FOUNDATION 225 W WASHINGTON ST CHICAGO, IL 60606	02-0569830	501 C (3)	20,000.	0.			GENERAL SUPPORT	
JORGE M. PEREZ ART MUSEUM OF MIAMI-DADE COUNTY, INC 1103 BISCAYNE BLVD MIAMI, FL 33132	59-2048869	501 C (3)	15,763.	0.			GENERAL SUPPORT	
JUDGES AND LAWYERS BREAST CANCER ALERT, INC 100 CROSBY ST STE 303 - NEW YORK, NY 10012	13-3679981	501 C (3)	62,000.	0.			GENERAL SUPPORT	

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	59-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	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
JUNIOR ACHIEVEMENT OF CHICAGO							
651 W WASHINGTON BLVD							
CHICAGO, IL 60661	36-2170141	501 C (3)	10,000.	0.			GENERAL SUPPORT
JUNIOR ACHIEVEMENT OF GEAORGIA 460 ABERNATHY RD, NE							
ATLANTA, GA 30328	58-0598050	501 C (3)	16,843.	0.			GENERAL SUPPORT
JUNIOR ACHIEVEMENT OF GREATER MIAMI - 2124 NE 123RD ST - NORTH							
MIAMI, FL 33181	59-0807486	501 C (3)	12,878.	0.			GENERAL SUPPORT
KELLER RESTAURANT RELIEF FUND. 6540 WASHINGTON ST							
YOUNTVILLE, CA 95499	84-5188224	501 C (3)	10,000.	0.			GENERAL SUPPORT
KEY BISCAYNE COMMUNITY FOUNDATION 240 CRANDON BLVD							
KEY BISCAYNE, FL 33149	30-0239421	501 C (3)	1,199,173.	0.			GENERAL SUPPORT
KIDS IN DISTRESS INC. 819 NE 26 STREET							
FT LAUDERDALE, FL 33305	59-1927289	501 C (3)	37,450.	0.			GENERAL SUPPORT
KOLLEL OHEL TORAH AN ILLINOIS NOT FOR PROFIT CORPORATION - 3635 W							
DEVON AVE - CHICAGO, IL 60659	27-0158099	501 C (3)	70,000.	0.			GENERAL SUPPORT
KRISTI HOUSE, INC. 1265 NW 12TH AVE.							
MIAMI, FL 33136	65-0576650	501 C (3)	6,215.	0.			GENERAL SUPPORT
L.I.V.E. LEAD, INNOVATE, VOLUNTEER & EMPOWER, INC 11401 SW 88TH							
AVE - MIAMI, FL 33176	81-1106219	501 C (3)	5,053.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	chedule I (Form 990) UNITED WAY MIAMI INC.							
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)		
(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	
LA LIGA CONTRA EL CANCER								
2180 S.W. 12TH AVE.								
MIAMI, FL 33129	59-1629554	501 C (3)	29,742.	0.			GENERAL SUPPORT	
LAGUNA BEACH EDUCATION FOUNDATION								
733 ST. ANN'S DR								
LAGUNA BEACH, CA 92651	95-3565451	501 C (3)	11,112.	0.			GENERAL SUPPORT	
LATINO JUDGES ASSOCIATION 1324E GUNHILL RD								
BRONX, NY 10469	87-2079514	501 C (3)	9,850.	0.			GENERAL SUPPORT	
BRONA, N1 10409	07-2079314	501 C (3)	9,050.	0.			GENERAL SUFFORT	
LAW FOUNDATION OF SILICON VALLEY								
152 N 3RD ST FL 3								
SAN JOSE, CA 95112	52-1014754	501 C (3)	8,160.	0.			GENERAL SUPPORT	
LAW ROCKS, INC.			1					
1600 ROSECRANS AVE MEDIA CENTER								
STE 400 - MANHATTAN BEACH, CA								
90266	45-3264456	501 C (3)	27,203.	0.			GENERAL SUPPORT	
LAWYERS ALLIANCE FOR NEW YORK								
171 MADISON AVE FL 6	12 2555122	504 5 (2)	20.050					
NEW YORK, NY 10016	13-2666432	501 C (3)	32,250.	0.			GENERAL SUPPORT	
INVERG CONTEMPE FOR CIVIL DI								
LAWYERS COMMITTEE FOR CIVIL RI SUITE 400 1401 NEW YORK AVE. N.W.								
	52-0799246	501 C (3)	22 350	0.			GENERAL SUPPORT	
WASHINGTON, DC 20005	32-0733240	501 C (3)	22,350.	0.			GENERAL SUFFORT	
LEGAL INFORMATION FOR FAMILIES								
TODAY - 32 COURT ST - BROOKLYN, NY								
11201	13-3910567	501 C (3)	23,000.	0.			GENERAL SUPPORT	
			1					
LEGAL PREP CHARTER ACADEMIES								
4319 W WASHINGTON BLVD								
CHICAGO, IL 60624	27-1071296	501 C (3)	7,000.	0.			GENERAL SUPPORT	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LEGAL SERVICES FOR NEW YORK CITY									
40 WORTH ST STE 606									
NEW YORK, NY 10013	13-2600199	501 C (3)	22,800.	0.			GENERAL SUPPORT		
LEGAL SERVICES OF GREATER MIAMI,									
INC 4343 WEST FLAGLER ST -									
MIAMI, FL 33137	59-1227481	501 C (3)	190,859.	0.			GENERAL SUPPORT		
LEISURE ACCESS FOUNDATION									
18851 NE 29TH AVE.									
AVENTURA, FL 33180	65-0281274	501 C (3)	8,891.	0.			GENERAL SUPPORT		
LIBERTY SCIENCE CENTER, INC.									
222 JERSEY CITY BLVD				_					
JERSEY CITY, NJ 07305	22-2302253	501 C (3)	15,500.	0.			GENERAL SUPPORT		
THE COLEMON CARES TWO									
LIFE SCIENCE CARES, INC. PO BOX 425486									
CAMBRIDGE, MA 02142	81-2435939	501 C (3)	20,000.	0.			GENERAL SUPPORT		
LINCOLN CENTER FOR THE PERFORMING	01-2433939	501 C (3)	20,000.	0.			GENERAL SUFFORT		
ARTS, INC 70 LINCOLB CENTER									
PLAZA 9TH FLOOR - NEW YORK, NY									
10023	13-1844713	501 C (3)	16,000.	0.			GENERAL SUPPORT		
LITTLE HAVANA ACTIVITIES AND			, -	-					
NUTRITION CENTERS OF DADE COUNTY -									
700 SW 8TH STREET - MIAMI, FL									
33130	23-7378008	501 C (3)	135,852.	0.			GENERAL SUPPORT		
LONG ISLAND UNIVERSITY									
700 NORTHERN BLVD									
GREENVALE, NY 11548	11-1633516	501 C (3)	105,400.	0.			GENERAL SUPPORT		
LOTUS ENDOWMENT FUND, INC.									
3921 ALTON RD									
MIAMI BEACH, FL 33140	92-0233563	501 C (3)	100,000.	0.			GENERAL SUPPORT		

Part II Continuation of Grants and Other	Assistance to Do	Intestic Organization		overnments (Sch	edule i (Form 990), Pa I	T II.)	<u> </u>
(a) Name and address of organization or government	( <b>b)</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
I.U.J.E.R., INC.							
27112 S DIXIE HWY							
NARANJA, FL 33032	65-0534683	501 C (3)	50,000.	0.			GENERAL SUPPORT
MADISON SQUARE PARK CONSERVANCY,							
INC - 11 MADISON AVE - NEW YORK,							
NY 10010	14-1859935	501 C (3)	29,400.	0.			GENERAL SUPPORT
MAESTRO CARES FOUNDATION							
1459 W HUBBARD ST							
CHICAGO, IL 60642	45-3706112	501 C (3)	17,500.	0.			GENERAL SUPPORT
W							
MAKE A WISH FOUNDATION OF ARIZONA,							
INC 2901 N 78TH ST - 2901 N	96 0400636	E01 (2.)	6 600	0			GENERAL GURRORM
78TH ST, AZ 85251	86-0409636	501 C (3)	6,600.	0.			GENERAL SUPPORT
MAKE A WISH FOUNDATION OF SOUTHERN							
FLORIDA, INC 4491 S STATE RD 7							
- FT LAUDERDALE, FL 33314	59-2620322	501 C (3)	21,252.	0.			GENERAL SUPPORT
MAKE-A-WISH FOUNDATION SOUTHERN							
NEVADA - 9950 COVINGTON CROSS DR -							
LAS VEGAS, NV 89144	88-0371088	501 C (3)	35,000.	0.			GENERAL SUPPORT
MALTZ JUPITER THEATER, INC.							
1001 E INDIANTOWN							
JUPITER, FL 33408	65-0985652	501 C (3)	17,000.	0.			GENERAL SUPPORT
,		, , ,					
MANHATTAN LEGAL SERVICES							
40 WORTH ST							
NEW YORK, NY 10013	13-2613958	501 C (3)	17,750.	0.			GENERAL SUPPORT
MARCUS JEWISH COMMUNITY CENTER OF							
ATLANTA, INC 5342 TILLY MILL							
ROAD - DUNWOODY, GA 30338	58-0566126	501 C (3)	18,200.	0.			GENERAL SUPPORT
ROLL DIMMODI, OIL 30330	1 33 0300120	P = 0 (3)	10,200.	٠.		L	BENEKAL BOTTOKT

(a) Name and address of organization or government	(b) EIN	(c) IRC section	(d) Amount of				
		if applicable	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
MARINE CORPS SCHOLARSHIP FOUNDATION - 909 N WASHINGTON ST -							
ALEXANDRIA, VA 22314	22-1905062	501 C (3)	9,000.	0.			GENERAL SUPPORT
MATT AND LISA ALLEN FAMILY FOUNDATION, INC 1420 NE 101 ST	92-1762955	501 C (3)	60,000.	0.			GENERAL SUPPORT
- MIAMI SHORES, FL 33138	JZ 170ZJ33	501 € (3)	00,000.	<u> </u>			SENERAL SOLIORI
MEMORIAL HERMANN FOUNDATION 929 GESSNER							
HOUSTON, TX 77024	74-1653640	501 C (3)	20,700.	0.			GENERAL SUPPORT
MEN OF DISTINCTION OF GREATER 7914 S WELLINGTON							
HOUSTON, TX 77055	26-0421594	501 C (3)	6,600.	0.			GENERAL SUPPORT
METROPOLITAN FAMILY SERVICES 101 NORTH WACKER DR							
CHICAGO, IL 60606	36-2167940	501 C (3)	11,640.	0.			GENERAL SUPPORT
MEXICAN AMERICAN BAR FOUNDATION PO BOX 862127							
LOS ANGELES, CA 90086	95-4358513	501 C (3)	10,500.	0.			GENERAL SUPPORT
MIAMI BEACH JEWISH COMMUNITY CENTER, INC - 4221 PINE TREE DR -							
MIAMI BEACH, FL 33140	59-2788834	501 C (3)	10,000.	0.			GENERAL SUPPORT
MIAMI BRIDGE YOUTH & FAMILY							
SERVICES - 2810 NW SOUTH RIVER DR							
- MIAMI, FL 33125	59-2569847	501 C (3)	185,044.	0.			GENERAL SUPPORT
MIAMI CHILDRENS HEALTH SYSTEM,							
INC. DBA NICKLAUS CHILDREN'S - 3100 S.W. 62ND AVENUE - MIAMI, FL							
33155	45-3481327	501 C (3)	97,627.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	T
(a) Name and address of organization or government	( <b>b)</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 CHILDREN'S MUSEUM, INC.							
980 MACARTHUR CAUSEWAY							
MIAMI, FL 33132	59-2396999	501 C (3)	13,500.	0.			GENERAL SUPPORT
MIAMI CITY BALLET, INC.							
2200 LIBERTY AVE							
MIAMI BEACH, FL 33139	59-2578534	501 C (3)	5,027.	0.			GENERAL SUPPORT
MIAMI COALITION OF CHRISTIANS AND							
JEWS, INC 150 SE 2ND AVE -	20 2524204	E01 (2./2)	26,000	0			GENERAL GURRORE
MIAMI, FL 33131	20-3534284	501 C (3)	26,000.	0.			GENERAL SUPPORT
MIAMI DADE COLLEGE FOUNDATION,							
INC 300 NE 2ND AVENUE - MIAMI,							
FL 33132	59-6169745	501 C (3)	39,911.	0.			GENERAL SUPPORT
MIAMI HOMES FOR ALL, INC.							
1951 NW 7TH AVE							
MIAMI, FL 33136	59-2521237	501 C (3)	100,000.	0.			GENERAL SUPPORT
MIAMI LIGHTHOUSE FOR THE BLIND &							
VISUALLY IMPAIRED, INC 601 SW	F0 0627047	E01 G (2)	20.044	0			GENERAL GURRORE
8TH AVE - MIAMI, FL 33130	59-0637847	501 C (3)	30,844.	0.			GENERAL SUPPORT
MICHAEL-ANN RUSSELL JCC							
18900 NE 25TH AVE							
NORTH MIAMI BEACH, FL 33180	59-2791269	501 C (3)	86,470.	0.			GENERAL SUPPORT
,		, , ,					
MIDTOWN EDUCATIONAL FOUNDATION							
718 S LOOMIS ST							
CHICAGO, IL 60607	36-3417278	501 C (3)	5,700.	0.			GENERAL SUPPORT
MINORITY CORPORATE COUNSEL							
ASSOCIATION, INC 1111							
PENNSYLLVANIA AVE. NW -							
WASHINGTON, DC 20004	13-3920905	501 C (3)	25,000.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	i
(a) Name and address of organization or government	( <b>b)</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
MITCHELL LARGE FAMILY CHILD CARE HOME - 1421 NW 5TH AVE - FLORIDA CITY, FL 33034	58-9034321	501 C (3)	54,049.	0.			GENERAL SUPPORT
MMC COMMUNITY FOUNDATION, INC.DBA VBC GIVING FOUNDATION, INC - 6128							
RIDGE AVE - PHILADELPHIA, PA 19128	85-1590783	501 C (3)	25,000.	0.			GENERAL SUPPORT
MOBILIZATION FOR JUSTICE, INC. 100 WILLIAM ST NEW YORK, NY 10038	13-2622748	501 C (3)	22,000.	0.			GENERAL SUPPORT
MOLLOY COLLEGE 1000 HEMPSTEAD AVE ROCKVILLE CENTRE., NY 11570	11-1797182	501 C (3)	8,000.	0.			GENERAL SUPPORT
MOUNT SINAI MEDICAL CENTER FOUNDATION - 4300 ALTON RD - MIAMI BEACH, FL 33140	59-1711400	501 C (3)	63,025.	0.			GENERAL SUPPORT
MOUNT ST. MICHAEL ACADEMY 4300 MURDOCK AVE BRONX, NY 10466	13-1740475	501 C (3)	10,000.	0.			GENERAL SUPPORT
MUSEUM OF DISCOVERY AND SCIENCE, INC 401 SW 2ND ST - FORT			,				
MUSEUM OF THE AFRICAN DIASPORA 685 MISSION ST	59-1709542	501 C (3)	14,750.	0.			GENERAL SUPPORT
SAN FRANCISCO, CA 94105	94-3338239	501 C (3)	8,800.	0.			GENERAL SUPPORT
MUSICARES FOUNDATION, INC. 3030 OLYMPIC BLVD.	05 4470000	E01 G (2)	40.500	2			GENERAL GUDDODE
SANTA MONICA, CA 90404	95-4470909	501 C (3)	49,500.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	( <b>b)</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
NAMI OF MIAMI, INC.							
P.O. BOX 430230							
MIAMI, FL 33243	59-2207150	501 C (3)	40,000.	0.			GENERAL SUPPORT
NATIONAL BLACK ARTS FESTIVAL, INC. 235 PEACHTREE ST NE							
ATLANTA, GA 30303	58-1736780	501 C (3)	9,500.	0.			GENERAL SUPPORT
NATIONAL CONSTITUTION CENTER 525 ARCH ST							
PHILADELPHIA, PA 19160	23-2434447	501 C (3)	25,000.	0.			GENERAL SUPPORT
NATIONAL FOUNDATION FOR ADVANCEMENT IN THE ARTS (NFAA) - 2100 BISCAYNE BLVD MIAMI, FL							
33137	59-2141837	501 C (3)	6,500.	0.			GENERAL SUPPORT
NATIONAL IMMIGRATION FORUM 50 F NW							
WASHINGTON, DC 20001	13-1776711	501 C (3)	10,000.	0.			GENERAL SUPPORT
NATIONAL JEWISH HEALTH 1400 JACKSON ST							
DENVER, CO 80206	74-2044647	501 C (3)	19,750.	0.			GENERAL SUPPORT
NATIONAL JEWISH HEALTH - NEW YORK 271 MADISON AVE.							
NEW YORK, NY 10016	74-2044647	501 C (3)	39,420.	0.			GENERAL SUPPORT
NATIONAL JEWISH POLICY CENTER 50 F STREET, NW							
WASHINGTON, DC 20001	52-1433850	501 C (3)	15,000.	0.			GENERAL SUPPORT
NATIONAL LGBTQ TASK FORCE 801 ARTHUR GODFREY RD							
MIAMI BEACH, FL 33140	52-1624852	501 C (3)	9,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa I	rt II.)	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
NATIONAL MULTIPLE SCLEROSIS							
SOCIETY - 900 S BROADWAY - DENVER,							
CO 80209	13-5661935	501 C (3)	10,000.	0.			GENERAL SUPPORT
NATIONAL MULTIPLE SCLEROSIS		, , ,					
SOCIETY SOUTH FLORIDA CHAPTER -							
3125 W COMMERCIAL BLVD - FORT							
LAUDERDALE, FL 33309	13-5661935	501 C (3)	7,880.	0.			GENERAL SUPPORT
·			,				
NATIONAL URBAN LEAGUE, INC.							
8 PINE ST							
NEW YORK, NY 10005	13-1840489	501 C (3)	12,740.	0.			GENERAL SUPPORT
NEIGHBORHOOD LEGAL SERVICES							
PROGRAM OF THE DIST. OF COLUMBIA -							
64 NEW YORK AVE, NE - WASHINGTON,							
DC 20002	52-0858001	501 C (3)	9,000.	0.			GENERAL SUPPORT
NEVADA BALLET THEATRE, INC							
1651 INNER CIR							
LAS VEGAS, NV 89134	94-2427112	501 C (3)	10,200.	0.			GENERAL SUPPORT
NEW ENGLAND LEGAL FOUNDATION							
150 LINCOLN ST							
BOSTON, MA 02111	04-2609210	501 C (3)	5,500.	0.			GENERAL SUPPORT
,			, , , , ,				
NEW HORIZONS COMMUNITY MENTAL							
HEALTH CENTER - 1469 NW 36TH ST -							
MIAMI, FL 33142	59-2055751	501 C (3)	52,009.	0.			GENERAL SUPPORT
NEW JERSEY INSTITUTE FOR SOCIAL							
JUSTICE - 60 PARK PL - NEWARK, NJ							
07102	22-3478143	501 C (3)	9,000.	0.			GENERAL SUPPORT
NEW SCHOOL FOR CHILD DEVELOPMENT A							
13130 BURBANK BLVD							
SHERMAN OAKS, CA 91401	95-3295132	501 C (3)	22,900.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-0830840 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	T
(a) Name and address of organization or government	<b>(b)</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	<b>(h)</b> Purpose of grant or assistance
NEW WORLD SYMPHONY							
500 17TH ST							
MIAMI BEACH, FL 33139	59-2809056	501 C (3)	75,000.	0.			GENERAL SUPPORT
NEW YORK CITY POLICE FOUNDATION,							
INC 555 FIFTH AVE - NEW YORK,							
NY 10017	13-2711338	501 C (3)	22,000.	0.			GENERAL SUPPORT
			1	<u> </u>			
NEW YORK COUNTY LAWYERS'							
ASSOCIATION - 14 VESEY ST - NEW							
YORK, NY 10007	13-5273040	501 C (3)	18,261.	0.			GENERAL SUPPORT
NEW YORK EDGE ING							
NEW YORK EDGE, INC. 58-12 QUEENS BLVD							
WOODSIDE, NY 11377	11-3112635	501 C (3)	9,850.	0.			GENERAL SUPPORT
NOODSIDE, NI 11077	11 3112033	301 0 (3)	3,030.	<u> </u>			DINDING BOTTON
NEW YORK LAWYERS FOR THE PUBLIC							
INTEREST, INC 151 W 30TH ST -							
NEW YORK, NY 10001	18-2860703	501 C (3)	40,000.	0.			GENERAL SUPPORT
NEW YORK LEAGUE OF CONSERVATION							
VOTERS EDUCATION FUND, INC 30	12 2727122	E01 (2 / 2)	0.250	0.			GENERAL SUPPORT
BROAD ST - NEW YORK, NY 10004	13-3727122	501 C (3)	9,250.	0.			GENERAL SUPPORT
NEW YORK LEGAL ASSISTANCE GROUP,							
INC 450 W 33RD ST - NEW YORK,							
NY 10001	13-3505428	501 C (3)	16,560.	0.			GENERAL SUPPORT
NEW YORKERS FOR PARKS							
55 BROAD ST.	12 64 67275	501 6 (2)		_			
NEW YORK, NY 10004	13-6167879	501 C (3)	9,400.	0.			GENERAL SUPPORT
NJ LEEP, INC.							
570 BROAD ST							
NEWARK, NJ 07102	51-0591204	501 C (3)	52,390.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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	<b>(h)</b> Purpose of grant or assistance
NORTH MIAMI BEACH KOLLEL, INC.							
990 NE 175TH ST							
MIAMI, FL 33162	46-4360732	501 C (3)	25,000.	0.			GENERAL SUPPORT
NORTHWESTERN MEMORIAL FOUNDATION							
541 N FAIRBANKS CT							
CHICAGO, FL 60611	36-3155315	501 C (3)	22,500.	0.			GENERAL SUPPORT
NOVA SOUTHEASTERN UNIVERSITY, INC.							
3301 COLLEGE AVENUE							
FORT LAUDERDALE, FL 33314	59-1083502	501 C (3)	7,500.	0.			GENERAL SUPPORT
NCORO POUNDAMION INC							
NSORO FOUNDATION, INC. PO BOX 724445							
ATLANTA, GA 31139	87-0758361	501 C (3)	16,000.	0.			GENERAL SUPPORT
OFFICE OF THE APPELLATE DEFENDER,							
INC 11 PARK PL - NEW YORK, NY							
10007	13-3468351	501 C (3)	14,320.	0.			GENERAL SUPPORT
ONLY MAKE BELIEVE, INC.							
1133 BROADWAY							
NEW YORK, NY 10010	13-4133410	501 C (3)	6,300.	0.			GENERAL SUPPORT
OPEN DOOR HEALTH CENTER, INC.							
P.O. BOX 901642							
HOMESTEAD, FL 33030	83-0375996	501 C (3)	51,221.	0.			GENERAL SUPPORT
,			, ,	-			
OPEN DOORS SOLUTIONS, INC.							
321 W HILL ST							
DECATUR, GA 30030	83-0841949	501 C (3)	50,000.	0.			GENERAL SUPPORT
ORANGE BLOSSOM FOOTBALL CLASSIC							
6625 MIAMI LAKES DR							
MIAMI LAKES, FL 33014	84-3014159	501 C (3)	40,000.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to De	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	<b>(b)</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
ORLANDO SCIENCE CENTER, INC. 777 E PRINCETON ST ORLANDO, FL 32803	59-0896343	501 C (3)	10,000.	0.			GENERAL SUPPORT
OSMAN FAMILY DAY CARE HOME 15341 NW 30TH AVE							
MIAMI, FL 33054	25-5198047	501 C (3)	38,607.	0.			GENERAL SUPPORT
OUR LADY OF LOURDES ACADEMY 5525 SW 84TH ST MIAMI, FL 33143	53-0196617	501 C (3)	6,997.	0.			GENERAL SUPPORT
OUR LADY OF LOURDES PRESCHOOL & CHILDCARE - 1164 W 71 ST HIALEAH, FL 33014	65-0813640	501 C (3)	8,771.	0.			GENERAL SUPPORT
OVERTOWN YOUTH CENTER, INC. 450 N.W. 14TH STREET MIAMI, FL 33136	65-1048896	501 C (3)	321,908.	0.			GENERAL SUPPORT
PAGE EDUCATION FOUNDATION 901 N 3RD ST							
PALMER TRINITY PRIVATE SCHOOL, INC 7900 S.W. 176 TH STREET -	36-3605013	501 C (3)	45,117.	0.			GENERAL SUPPORT
PALMETTO BAY, FL 33157	23-7098500	501 C (3)	40,312.	0.			GENERAL SUPPORT
PANDA CARES FOUNDATION, INC. 1683 WALNUT GROVE AVE ROSEMEAD, CA 91770	81-2094929	501 C (3)	23,600.	0.			GENERAL SUPPORT
PARRISH ART MUSEUM, INC. 279 MONTAUK HWY WATER MILL NY 11976	11_1782495	501 C (3)	16 600	n			GENERAL SUPPORT
PANDA CARES FOUNDATION, INC. 1683 WALNUT GROVE AVE ROSEMEAD, CA 91770 PARRISH ART MUSEUM, INC.		501 C (3)					

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(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	<b>(h)</b> Purpose of grant or assistance
ETER MICHAEL FOUNDATION							
GATE SIX RD							
SAUSALITO, CA 94965	94-3238961	501 C (3)	6,000.	0.			GENERAL SUPPORT
PHILANTHROPY MASSACHUSETTS							
133 FEDERAL ST							
BOSTON, MA 02110	04-2457605	501 C (3)	22,990.	0.			GENERAL SUPPORT
PINK AID, INC.							
PO BOX 5157							
WESTPORT, CT 06881	47-1031835	501 C (3)	18,850.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD OF SOUTH, EAST							
NORTH FLORIDA, INC 2300 N							
FLORIDA MANGO RD - WEST PALM							
BEACH, FL 33409	59-1391115	501 C (3)	6,234.	0.			GENERAL SUPPORT
DI AVEDG DILLI ANDUDODY EUND							
PLAYERS PHILANTHROPY FUND 1122 KENILWORTH DR							
TOWSON, MD 21204	27-6601178	501 C (3)	15,000.	0.			GENERAL SUPPORT
10.10011, 1.12 1.1201	27 0001170	(3,	10,000.	٠.			2011 311
POLICE OFFICERS ASSISTANCE TRUST,							
INC 1030 NW 111TH AVE DORAL,							
FL 33172	65-0164129	501 C (3)	114,035.	0.			GENERAL SUPPORT
POSSE FOUNDATION							
1101 BRICKELL AVE.		504 5 (2)	0.400				
MIAMI, FL 33131	13-3840394	501 C (3)	9,100.	0.			GENERAL SUPPORT
PRESBYTERIAN COMMUNITIES AND							
SERVICES FOUNDATION - 12467 MERIT							
DR - DALLAS, TX 75251	75-1910084	501 C (3)	9,400.	0.			GENERAL SUPPORT
·			,				
PRESTIGE CLUB OF SOUTHWEST							
BROWARD, INC 6191 ORANGE DR							
DAVIE, FL 33314	65-0717521	501 C (3)	15,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	<b>overnments</b> (Sch	edule I (Form 990), Pa ı	ırt II.)	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
PRO BONO INSTITUTE							
1001 G STREET NW							
WASHINGTON, DC 20001	52-1991509	501 C (3)	13,290.	0.			GENERAL SUPPORT
PRO BONO PARTNERSHIP OF ATLANTA							
999 PEACHTREE ST, NE							
ATLANTA, GA 30309	20-2614676	501 C (3)	10,000.	0.			GENERAL SUPPORT
PROJECT HEALING WATERS FLY FISHING, INC PO BOX 695 - LA							
PLATA, MD 20646	61-1518154	501 C (3)	5,150.	0.			GENERAL SUPPORT
PROJECT ROUSSEAU, INC. 1345 AVENUE OF THE AMERICAS							
NEW YORK, NY 10105	27-4529216	501 C (3)	7,500.	0.			GENERAL SUPPORT
PROJECT SUNSHINE, INC. 211 E 43RD ST							
NEW YORK, NY 10017	22-3607512	501 C (3)	14,100.	0.			GENERAL SUPPORT
PROJECT YES, INC. DBA YES INSTITUTE - 5275 SUNSET DRIVE -							
MIAMI, FL 33143	65-0646667	501 C (3)	10,176.	0.			GENERAL SUPPORT
PROJECTO POR AMOR A JESUS P.O. BOX 531032							
MIAMI SHORES, FL 33153	32-0286587	501 C (3)	16,556.	0.			GENERAL SUPPORT
PUERTO RICAN BAR ASSOCIATION SCHOLARSHIP FUND, INC 303 PARK							
AVE. S - NEW YORK, NY 10010	06-1016586	501 C (3)	6,120.	0.			GENERAL SUPPORT
QUALITY CARE FOR CHILDREN, INC. 2751 BUFORD HWY							
ATLANTA, GA 30324	58-2400285	501 C (3)	9,600.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	( <b>b)</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
RABBI HARRY H EPSTEIN, INC. 335 COLEWOOD WAY NW							
SANDY SPRINGS, GA 30328	58-1164034	501 C (3)	8,840.	0.			GENERAL SUPPORT
RANDALL'S ISLAND PARK ALLIANCE, INC 24 W 61ST ST - NEW YORK, NY							
10023	13-3787630	501 C (3)	8,500.	0.			GENERAL SUPPORT
RANSOM EVERGLADES SCHOOL 3575 MAIN HIGHWAY							
COCONUT GROVE, FL 33133	59-0659070	501 C (3)	489,918.	0.			GENERAL SUPPORT
RAVINIA FESTIVAL ASSOCIATION 418 SHERIDAN ROAD							
HIGHLAND PARK, IL 60035	36-6002273	501 C (3)	28,185.	0.			GENERAL SUPPORT
REDLANDS CHRISTIAN MIGRANT ASSOCIATION - 402 WEST MAIN STREET - IMMOKALEE, FL 34142	59-1221966	501 C (3)	153,127.	0.			GENERAL SUPPORT
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 1995 UNIVERSITY AVE - BERKELEY, CA							
94704	94-6002123	501 C (3)	35,125.	0.			GENERAL SUPPORT
RICHMOND-PERRINE OPTIMIST CLUB, INC 18055 HOMESTEAD AVENUE -							
MIAMI, FL 33157	59-2664308	501 C (3)	92,266.	0.			GENERAL SUPPORT
RIVERSIDE PARK CONSERVANCY, INC. 475 RIVERSIDE DRIVE							
NEW YORK, NY 10115	13-3443825	501 C (3)	13,200.	0.			GENERAL SUPPORT
ROBERT A TOIGO FOUNDATION 180 GRAND AVE							
OAKLAND, CA 94612	13-3565420	501 C (3)	23,500.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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OBERT F KENNEDY CENTER FOR							
JUSTICE AND HUMAN RIGHTS - 515							
MADISON AVE - NEW YORK, NY 10022	13-2522784	501 C (3)	86,750.	0.			GENERAL SUPPORT
ROBERT M BEREN ACADEMY							
.1333 CLIFFWOOD DR							
HOUSTON, TX 77035	74-1652136	501 C (3)	5,200.	0.			GENERAL SUPPORT
ROBERT W. WOODRUFF ARTS CENTER,							
INC 1280 PEACHTREE ST. NE -							
ATLANTA, GA 30309	58-0633971	501 C (3)	10,000.	0.			GENERAL SUPPORT
ONALD MODONALD HOUGE OF NEW YORK							
ONALD MCDONALD HOUSE OF NEW YORK,							
NC 405 E 73RD ST - NEW YORK, IY 10021	13-2933654	501 C (3)	25,000.	0.			GENERAL SUPPORT
VI 10021	13-2933034	501 C (3)	25,000.	0.			GENERAL SOFFORT
ROSALPHINE CHILD CARE							
2570 NW 139TH ST							
DPALOCKA, FL 33054	84-1939508	501 C (3)	247,007.	0.			GENERAL SUPPORT
ROUNDABOUT THEATRE COMPANY, INC.							
231 W 39TH							
IEW YORK, NY 10018	13-6192346	501 C (3)	71,500.	0.			GENERAL SUPPORT
UTH & NORMAN RALES JEWISH FAMILY							
SERVICE, INC 21300 RUTH & BARON							
OLEMAN BLVD - BOCA RATON, FL							
3428	65-1115689	501 C (3)	30,000.	0.			GENERAL SUPPORT
AFE & SOUND							
.757 WALLER ST							
SAN FRANCISCO, CA 94117	94-2455072	501 C (3)	21,900.	0.			GENERAL SUPPORT
SAKS FIFTH AVENUE FOUNDATION							
225 LIBERTY ST	62 1207402	E01 C /3\	14 400	_			CEMEDAI CHDDODE
NEW YORK, NY 10281	63-1207483	bot c (2)	14,400.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	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
ALVATION ARMY - MIAMI AREA							
COMMAND - 1907 N.W. 38TH STREET -							
IIAMI, FL 33142	58-0660607	501 C (3)	77,745.	0.			GENERAL SUPPORT
SANCTUARY FOR FAMILIES, INC.							
.O. BOX 1406 WALL STREET STATION							
IEW YORK, NY 10268	13-3193119	501 C (3)	7,480.	0.			GENERAL SUPPORT
SANT LA/HAITIAN NEIGHBORHOOD							
ENTER, - 5000 BISCAYNE BLVD							
MIAMI, FL 33137	65-1080680	501 C (3)	168,583.	0.			GENERAL SUPPORT
SARCOMA FOUNDATION OF AMERICA,							
INC 9899 MAIN ST - DAMASCUS, MD							
20872	52-2275294	501 C (3)	47,900.	0.			GENERAL SUPPORT
SEBASTIAN STRONG FOUNDATION, INC.							
MIAMI SPRINGS, FL 33166	81-5044002	501 C (3)	6,231.	0.			GENERAL SUPPORT
SECURED FINANCE FOUNDATION							
770 7TH AVE.							
JEW YORK, NY 10001	13-3577148	501 C (3)	29,500.	0.			GENERAL SUPPORT
SETON FUND OF THE DAUGHTERS OF							
CHARITY OF ST. VINCENT DE PAU -							
206 W 38TH ST - AUSTIN, TX 78705	74-2212968	501 C (3)	6,700.	0.			GENERAL SUPPORT
,			, -				
HAARE ERZA SEPHARDIC CONGREGATION							
45 W 41ST STREET							
HAMI BEACH, FL 33140	65-0736858	501 C (3)	30,220.	0.			GENERAL SUPPORT
SHAD PROJECT							
1934 OLD GALLOWS RD STE 350							
YSONS, VA 22182	84-3731040	501 C (3)	19,700.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	<del> </del>
(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	<b>(h)</b> Purpose of grant or assistance
SHALOM PARK							
14800 E BELLEVIEW DR							
AURORA, CO 80015	74-2376546	501 C (3)	10,000.	0.			GENERAL SUPPORT
SOUTH FLORIDA ART CENTER, INC.							
924 LINCOLN RD							
MIAMI BEACH, FL 33139	59-2423867	501 C (3)	5,895.	0.			GENERAL SUPPORT
SOUTH FLORIDA PBS, INC.							
3401 S CONGRESS AVE							
BOYNTON BEACH, FL 33426	59-0737868	501 C (3)	95,000.	0.			GENERAL SUPPORT
·			·				
SOUTH FLORIDA SYMPHONY ORCHESTRA							
2201 WILTON DRIVE							
WILTON MANORS, FL 33305	65-0846695	501 C (3)	9,900.	0.			GENERAL SUPPORT
COMMUNICAL COCTAL CERVICES DROCKAM							
SOUTHWEST SOCIAL SERVICES PROGRAM, INC 25 TAMIAMI BLVD MIAMI,							
FL 33144	59-2102294	501 C (3)	90,578.	0.			GENERAL SUPPORT
		001 0 (0)	30,070.				
SPARK YOUTH NYC, INC.							
444 MADISON AVE							
NEW YORK, NY 10022	13-3037380	501 C (3)	24,720.	0.			GENERAL SUPPORT
annaria arimmaa maanna aya							
SPECIAL OLYMPICS FLORIDA, INC.							
1915 DON WICKHAM DR	22 7101560	E01 (2.)	9 000	0.			GENERAL SUPPORT
CLERMONT, FL 34711	23-7181560	501 C (3)	8,000.	0.			GENERAL SUPPORT
SPECIAL OLYMPICS NEW JERSEY, INC.							
1 EUNICE KENNEDY SHRIVER WAY							
LAWRECEVILLE, NJ 08648	23-7448729	501 C (3)	18,840.	0.			GENERAL SUPPORT
SPONSORS FOR EDUCATIONAL							
OPPORTUNITY - 55 EXCHANGE PL - NEW							
YORK, NY 10005	13-2578670	501 C (3)	24,250.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	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
ST. ALBAN'S CHILD ENRICHMENT							
CENTER - 3465 BROOKER ST MIAMI, FL 33133	59-0766992	501 C (3)	233,039.	0.			GENERAL SUPPORT
ST. ALBAN'S DAY NURSERY, INC. 3465 BROOKER ST							
MIAMI, FL 33133	59-0766992	501 C (3)	121,673.	0.			GENERAL SUPPORT
ST. JOHN'S UNIVERSITY 800 UTOPIA PKWY							
JAMAICA, NY 11439	11-1630830	501 C (3)	11,375.	0.			GENERAL SUPPORT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL, INC 501 SAINT JUDE PL							
- MEMPHIS, TN 38105	35-1044585	501 C (3)	27,819.	0.			GENERAL SUPPORT
ST. MARY ARMENIAN CHURCH 4050 NW 100TH AVE	12 1620202	F01 (2 / 2)	6,062				STANDAL GARDON
HOLLYWOOD, FL 33024	13-1628202	501 C (3)	6,063.	0.			GENERAL SUPPORT
ST. THOMAS UNIVERSITY 16401 N.W. 37TH AVENUE							
MIAMI GARDENS, FL 33054	59-0949880	501 C (3)	20,000.	0.			GENERAL SUPPORT
STEPHANIE E. CLEMENTS FAMILY DAY CARE HOME - 2173 NW 81ST STREET -							
MIAMI, FL 33147	46-4595595	501 C (3)	30,885.	0.			GENERAL SUPPORT
STEPPENWOLF THEATER COMPANY 1650 N HALSTED ST							
CHICAGO, IL 60614	51-0149370	501 C (3)	18,400.	0.			GENERAL SUPPORT
STREET LAW, INC 1010 WAYNE AVE STE 870							
SILVER SPRINGS, MD 20910	52-2015256	501 C (3)	7,500.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	
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SUNRISE DAY CAMPS ASSOCIATION,							
INC 11 NEIL CT OCEANSIDE, NY							
11572	46-5555854	501 C (3)	6,338.	0.			GENERAL SUPPORT
			, -	-			
SUNSYSTEM DEVELOPMENT CORPORATION							
DBA ADVENTHEALTH FOUNDATION							
ORLANDO, FL 32803	59-2219301	501 C (3)	25,000.	0.			GENERAL SUPPORT
T. HOWARD FOUNDATION							
8630 FENTON ST STE 613							
SILVER SPRINTS, MD 20910	54-1712500	501 C (3)	17,875.	0.			GENERAL SUPPORT
MAINUDIA COLLEGE OF FLORIDA INC							
TALMUDIC COLLEGE OF FLORIDA, INC. 400 ALTON RD							
MIAMI BEACH, FL 33140	59-1571122	501 C (3)	100,000.	0.			GENERAL SUPPORT
MIAMI BEACH, FE 33140	39-13/1122	501 C (3)	100,000.	0.			GENERAL SUFFORT
TEMPLE BETH AM							
5950 SW 88TH ST	1						
MIAMI, FL 33156	13-1663143	501 C (3)	27,056.	0.			GENERAL SUPPORT
,			,				
TEMPLE BETH SHOLOM							
4144 CHASE AVENUE							
MIAMI BEACH, FL 33140	59-0714828	501 C (3)	617,598.	0.			GENERAL SUPPORT
TEMPLE ISRAEL OF GREATER MIAMI							
137 N.E. 19TH ST							
MIAMI, FL 33132	59-0683270	501 C (3)	10,000.	0.			GENERAL SUPPORT
MINDLE TUDES							
TEMPLE JUDEA							
5500 GRANADA BLVD.	F0 0701049	E01 C (3)	F 107	0.			CEMEDAI CUDDODE
CORAL GABLES, FL 33146	59-0791048	501 C (3)	5,107.	0.			GENERAL SUPPORT
TEMPLE MENORAH							
620 75TH STREET							
MIAMI BEACH, FL 33141	59-0737893	E01 C (2)	23,394.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	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
TEXAS ACCESS TO JUSTICE FOUNDATION							
P.O. BOX 12886 AUSTIN, TX 78711	74-2354575	501 C (3)	18,800.	0.			GENERAL SUPPORT
TEXAS CHILDREN'S HOSPITAL			,				
HOUSTON, TX 77030	74-1100555	501 C (3)	9,250.	0.			GENERAL SUPPORT
TEXAS STATE HISTORY MUSEUM FOUNDATION - PO BOX 12456 -							
AUSTIN, TX 78711	74-2916783	501 C (3)	17,808.	0.			GENERAL SUPPORT
THE 42ND STREET WORKSHOP, INC. 312 W 36TH ST FL 4							
NEW YORK, NY 10018	13-3763953	501 C (3)	20,000.	0.			GENERAL SUPPORT
THE ADMINISTRATORS OF THE TULANE 6823 ST CHARLES AVE	E0 0402000	501 6 (2)	100 500				
NEW ORLEANS, LA 70118	72-0423889	501 C (3)	102,500.	0.			GENERAL SUPPORT
THE ALFRED AND ADELE DAVIS ACADEMY 8105 ROBERTS DRIVE							
ATLANTA, GA 30350	58-1970181	501 C (3)	7,600.	0.			GENERAL SUPPORT
THE ALFRED E. SMITH MEMORIAL							
NEW YORK, NY 10022	53-0196617	501 C (3)	32,500.	0.			GENERAL SUPPORT
THE AMERICAN IRELAND FUND 10 POST OFFICE SQUARE							
BOSTON, MA 02109	25-1306992	501 C (3)	13,100.	0.			GENERAL SUPPORT
THE ARC OF SOUTH FLORIDA P.O. BOX 371333							
MIAMI, FL 33137	59-0839562	501 C (3)	183,929.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sche	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 BOARD OF TRUSTEES OF THE							
LELAND - 326 GALVEZ STREET -							
STANFORD, CA 94305	94-1156365	501 C (3)	30,000.	0.			GENERAL SUPPORT
THE CHADTOUGH FOUNDATION DBA			,				
CHADTOUGH DEFEAT DIPG FOUNDATIO -							
201 W MICHIGAN AVE - SALINE, MI							
48176	47-4041494	501 C (3)	10,000.	0.			GENERAL SUPPORT
THE CHIEF EXECUTIVE LEADERSHIP							
INSTITUTE OF THE YALE SCHOOL - $101$							
CONSTITUTION AVE, NW - WASHINGTON,							
DC 20001	58-2617787	501 C (3)	100,000.	0.			GENERAL SUPPORT
THE CHILD CENTER OF NY							
118-35 QUEENS BLVD FL 6							
FOREST HILLS, NY 11375	11-1733454	501 C (3)	22,350.	0.			GENERAL SUPPORT
THE GLAVES TOURNATION							
THE CLAYCO FOUNDATION							
35 E WACKER DR, STE 1300	47 1220502	E01 (2.)	9 600	0			GENERAL GURRORM
CHICAGO, IL 60601	47-1330583	501 C (3)	8,600.	0.			GENERAL SUPPORT
THE COMMUNITY FOUNDATION FOR							
GREATER ATLANTA, INC 191 PEACHTREE ST NE - ATLANTA, GA							
30303	58-1344646	501 C (3)	15,000.	0.			GENERAL SUPPORT
	30-1344040	501 C (3)	13,000.	0.			GENERAL SUFFORT
THE EDUCATION FUND							
6713 MAIN ST							
MIAMI LAKES, FL 33014	59-2468114	501 C (3)	23,223.	0.			GENERAL SUPPORT
	07 2100221	(0)	20,220.	<u> </u>			20110111
THE EVERGLADES FOUNDATION, INC.							
18001 OLD CUTLER RD							
PALMETTO BAY, FL 33157	59-3228899	501 C (3)	25,355.	0.			GENERAL SUPPORT
,							
THE FAMILY CHRISTIAN ASSOCIATION							
OF AMERICA, INC 14701 N.W. 7TH							
AVENUE - MIAMI, FL 33168	59-2371125	501 C (3)	135,395.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do			overnments (SCH		T	1
(a) Name and address of organization or government	( <b>b)</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 FEDCAP GROUP, INC.							
633 3RD AVE							
NEW YORK, NY 10017	83-0765672	501 C (3)	12,000.	0.			GENERAL SUPPORT
THE FLORIDA INTERNATIONAL			, -				
UNIVERSITY BOARD OF TRUSTEES -							
11200 SW 8TH STREET, CSC314 -							
MIAMI, FL 33199	65-0177616	501 C (3)	97,750.	0.			GENERAL SUPPORT
THE FOUNDATION FOR NEW EDUCATION							
INITIATIVES, INC 1500 BISCAYNE							
BOULEVARD - MIAMI, FL 33132	61-1566768	501 C (3)	5,500.	0.			GENERAL SUPPORT
THE HOME FOR LITTLE WANDERES, INC. 271 HUNTINGTON AVE.							
	04-2104764	501 C (3)	6 500	0.			GENERAL SUPPORT
BOSTON, MA 02115	04-2104/64	501 C (3)	6,500.	0.			GENERAL SUPPORT
THE HONORABLE TINA BROZMAN FOUNDATION, INC 31 WEST 52ND ST							
- NEW YORK, NY 10019		501 C (3)	29,000.	0.			GENERAL SUPPORT
THE INNER CIRCLE, INC. P.O. BOX 5372							
NEW YORK, NY 10185	13-3360989	501 C (3)	9,000.	0.			GENERAL SUPPORT
THE JEROME BETTIS BUS STOPS HERE FOUNDATION - 15700 W TEN MILES RD							
- SOUTHFIELD, MI 48075	38-3378049	501 C (3)	16,500.	0.			GENERAL SUPPORT
THE JEWISH THEOLOGICAL SEMINARY OF AMERICA - 3080 BROADWAY AVE - NEW							
YORK, NY 10027	13-0887640	501 C (3)	50,000.	0.			GENERAL SUPPORT
THE JULIANA GREENFIELD FAMILY FOUNDATION - 2215 SANDERS RD STE							
100N - CHICAGO, IL 60601	83-3830498	501 C (3)	200,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	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	<b>(h)</b> Purpose of grant or assistance
THE LEARNING EXPERIENCE SCHOOL,							
INC 5651 SW 82ND AVENUE RD -							
MIAMI, FL 33143	59-1913861	501 C (3)	8,348.	0.			GENERAL SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETY							
3 INTERNATIONAL DR							
RYE BROOK, NY 10573	13-5644916	501 C (3)	10,000.	0.			GENERAL SUPPORT
THE LEWISH A LIMBUON GOODEN							
THE LEUKEMIA & LYMPHOMA SOCIETY							
200 SOUTH PARK RD STE 140 HOLLYWOOD, FL 33021	13-5644916	501 C (3)	10,052.	0.			GENERAL SUPPORT
THE MELISSA INSTITUTE FOR VIOLENCE	13-3044910	501 C (3)	10,032.	0.			GENERAL SOFFORT
PREVENTION AND TREATMENT, - 1507							
LEVANTE AVE STE 331 - CORAL							
GABLES, FL 33146	65-0683088	501 C (3)	9,938.	0.			GENERAL SUPPORT
	00 000000	002 0 (0)	7,200.	•			
THE MIAMI FOUNDATION							
40 NW 3RD STREET							
MIAMI, FL 33128	65-0350357	501 C (3)	441,084.	0.			GENERAL SUPPORT
,			, -	-			
THE NATIONAL JUDICIAL COLLEGE							
COLLEGE DR							
RENO, NV 89557	94-2427596	501 C (3)	100,000.	0.			GENERAL SUPPORT
THE ORANGE BOWL COMMITTEE, INC.							
14360 NW 77TH CT							
MIAMI LAKES, FL 33016	59-0384382	501 C (3)	100,500.	0.			GENERAL SUPPORT
THE PHILLIP AND PATRICIA FROST							
MUSEUM OF SCIENCE - 1101 BISCAYNE							
BLVD - MIAMI, FL 33132	59-0854960	501 C (3)	262,500.	0.			GENERAL SUPPORT
THE RICHSTONE CENTER, INC.							
13620 CORDARY AVE							
HAWTHORNE, CA 90250	23-7373745	501 C (3)	13,000.	0.			GENERAL SUPPORT
, CII >0250	1 23 /3/3/43	P = 1 = 1 = 1	13,000.	٠.			PERENTI BOLLOKI

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	<b>overnments</b> (Scho	edule I (Form 990), Pa I	ırt II.)	I
(a) Name and address of organization or government	( <b>b)</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	<b>(h)</b> Purpose of grant or assistance
HE SHAQUILLE O'NEAL FOUNDATION							
.0845 GRIFFIN PEAK DR							
LAS VEGAS, NV 89135	84-2488384	501 C (3)	10,000.	0.			GENERAL SUPPORT
THE SMITH CENTER FOR THE							
PERFORMING ARTS - 361 SYMPHONY							
PARK AVE - LAS VEGAS, NV 89103	88-0361875	501 C (3)	20,000.	0.			GENERAL SUPPORT
THE SOCIAL ENGINEERING PROJECT,							
INC 344 20TH ST - OAKLAND, CA							
94612	83-4147990	501 C (3)	9,040.	0.			GENERAL SUPPORT
THE V FOUNDATION							
106 TOWERVIEW CT							
CARY, NC 27513	13-3705951	501 C (3)	7,000.	0.			GENERAL SUPPORT
<u> </u>	10 0,00001	001 0 (0)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
THE WISH FOUNDATION INC.							
P.O. BOX 170364							
HIALEAH, FL 33017	65-0060285	501 C (3)	5,397.	0.			GENERAL SUPPORT
THEATRE UNDER THE STARS, INC.							
800 BAGBY STE 200							
HOUSTON, TX 77002	74-1621647	501 C (3)	8,040.	0.			GENERAL SUPPORT
·			,				
TINY KINGDOM LEARNING CENTER							
700 NW 10TH AVE							
HOMESTEAD, FL 33030	81-3263242	501 C (3)	560,940.	0.			GENERAL SUPPORT
TINY SMILE LEARNING CENTER II,							
INC 5605 NW 32ND AVE - MIAMI,							
FL 33142	84-3500496	501 C (3)	318,200.	0.			GENERAL SUPPORT
TORAS EMES ACADEMY OF MIAMI, INC.							
1025 NE MIAMI GARDENS DR.	50 100000	501 (2.42)	10.000				
NORTH MIAMI BEACH, FL 33179	59-1870702	DOT G (3)	10,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other		- Income of gameanon		Commonto (Com		1	
(a) Name and address of organization or government	<b>(b)</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
FRANSIT FOWARD							
1611 W 5TH ST							
AUSTIN, TX 78703	87-3621242	501 C (3)	10,000.	0.			GENERAL SUPPORT
TRUSTEES OF COLUMBIA UNIVERSITY							
622 W 113TH ST							
NEW YORK, NY 10025	13-5598093	501 C (3)	712,594.	0.			GENERAL SUPPORT
UJA - FEDERATION OF NEW YORK							
130 E 59TH ST							
NEW YORK, NY 10022	51-0172429	501 C (3)	50,565.	0.			GENERAL SUPPORT
UNITED HOME CARE SERVICES, INC.							
8400 NW 33RD ST							
MIAMI, FL 33122	59-1523943	501 C (3)	495,885.	0.			GENERAL SUPPORT
	07 1010710	(0,	120,000.				2011011
UNITED JEWISH APPEAL							
4200 BISCAYNE BLVD.							
MIAMI, FL 33137	59-0624404	501 C (3)	25,000.	0.			GENERAL SUPPORT
UNITED JEWISH COMMUNITY OF BROWARD							
COUNTY, INC 5890 S PINE ISLAND							
RD - DAVIE, FL 33328	59-0967823	501 C (3)	31,401.	0.			GENERAL SUPPORT
•			, ,				
UNITED STATES HOLOCAUST MEMORIAL							
MUSEUM - 100 RAOUL WALLENBERG PL							
SW - WASHINGTON, DC 20024	52-1309391	501 C (3)	21,844.	0.			GENERAL SUPPORT
UNITED WAY OF FLORIDA, INC.							
307 B EAST 7TH AVE	F0 0104175	E01 G (2)	115 405	_			GENERAL GURRORE
TALLAHASSEE, FL 32303	59-2104175	501 C (3)	115,427.	0.			GENERAL SUPPORT
UNITY ON THE BAY							
411 NE 21ST ST							
MIAMI, FL 33137	59-0816468	501 C (3)	7,880.	0.			GENERAL SUPPORT

Schedule I (Form 990) UNITED WA	Y MIAMI I	INC.				5	9-0830840 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	( <b>b)</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
UNIVERSITY OF CALIFORNIA IRVINE FOUNDATION - 100 THEORY - IRVINE, CA 92697	95-2540117	501 C (3)	14,975.	0.			GENERAL SUPPORT
UNIVERSITY OF MASSACHUSETTS  AMHERST FOUNDATION - 134 HICKS WAY  - AMHERST, MA 01003	54-2084125	501 C (3)	8,000.	0.			GENERAL SUPPORT
UNIVERSITY OF MIAMI PROGRAMS 1552 BRECIA AVE CORAL GABLES, FL 33146	59-0924458	501 C (3)	1,014,050.	0.			GENERAL SUPPORT
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK ST SE MINNEAPOLIS, MN 55455	41-6042488	501 C (3)	10,000.	0.			GENERAL SUPPORT
UNIVERSITY OF NEVADA LAS VEGAS 4505 MARYLAND PKWY LAS VEGAS, NV 89154	94-2790134	501 C (3)	10,000.	0.			GENERAL SUPPORT
UNIVERSITY OF SOUTHERN CALIFORNIA 3470 TROUSDALE PARKWAY LOS ANGELES, CA 90089	95-1642394	501 C (3)	32,202.	0.			GENERAL SUPPORT
UNIVERSITY OF TEXAS LAW SCHOOL FOUNDATION - 727 E DEAN KEETON ST - AUSTIN, TX 78705	74-6056794	501 C (3)	50,000.	0.			GENERAL SUPPORT
URBAN HEALTH PARTNERSHIPS 1800 SW 1ST AVE MIAMI, FL 33129	45-3332540	501 C (3)	60,000.	0.			GENERAL SUPPORT
URBAN LEAGUE OF GREATER MIAMI, INC 8500 NW 25TH AVE - MIAMI, FL 33147	59-0699445	501 C (3)	187,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	<b>overnments</b> (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
VALLEYWISE HEALTH FOUNDATION							
2901 E CAMELBACK RD							
PHOENIX, AZ 85016	86-0777567	501 C (3)	9,120.	0.			GENERAL SUPPORT
VAN ALEN INSTITUTE PROJECTS IN PUBLIC ARCHITECTURE - 30 W 22ND ST - NEW YORK, NY 10010	13-1655152	501 C (3)	10,000.	0.			GENERAL SUPPORT
,							
VERA INSTITUTE OF JUSTICE, INC. 233 BROADWAY FL 12							
NEW YORK, NY 10279	13-1941627	501 C (3)	33,500.	0.			GENERAL SUPPORT
VOICES FOR CHILDREN FOUNDATION, INC 601 NW 1ST CT - MIAMI, FL							
33136	59-2746076	501 C (3)	30,164.	0.			GENERAL SUPPORT
VOLUNTEER LAWYERS FOR THE ARTS, INC 1 E 53RD ST - NEW YORK, NY							
10022	13-2936291	501 C (3)	7,000.	0.			GENERAL SUPPORT
VOLUNTEERS OF LEGAL SERVICE, INC.							
NEW YORK, NY 10013	13-3234630	501 C (3)	23,100.	0.			GENERAL SUPPORT
WASHINGTON NATIONALS PHILANTHROPIES - 1500 S CAPITOL							
ST, SE - WASHINGTON, DC 20003	34-2034830	501 C (3)	11,250.	0.			GENERAL SUPPORT
WELLNESS HOUSE 131 N COUNTY LINE RD.							
HINSDALE, IL 60521	36-3636933	501 C (3)	9,775.	0.			GENERAL SUPPORT
WELLSPRING LIVING, INC. 1040 BOULEVARD							
ATLANTA, GA 30312	58-2614182	501 C (3)	20,000.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	<b>(b)</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	<b>(h)</b> Purpose of grant or assistance
WESTER CENTER ON LAW & POVERTY							
3701 WILSHIRE BLVD							
LOS ANGELES, CA 90010	95-2897721	501 C (3)	10,000.	0.			GENERAL SUPPORT
WESTERN JUSTICE CENTER FOUNDATION			,				
55 S GRAND AVE							
PASADENA, CA 91105	95-4176583	501 C (3)	14,000.	0.			GENERAL SUPPORT
WESTERN STOCK SHOW ASSOCIATION 4655 HUMBOLDT ST							
DENVER, CO 80216	84-0517361	501 C (3)	20,000.	0.			GENERAL SUPPORT
WGBH EDUCATIONAL FOUNDATION 1 GUEST ST BOSTON, MA 02135	04-2104397	501 C (3)	10,000.	0.			GENERAL SUPPORT
BOSTON, IMI 02133	04 2104337	501 6 (5)	10,000.	••			DENERTE BOTTORT
WHYHUNGER, INC. 505 8TH AVENUE							
NEW YORK, NY 10018	13-2805575	501 C (3)	7,650.	0.			GENERAL SUPPORT
WILLIAM WOODS UNIVERSITY ONE UNIVERSITY AVE							
FULTON, MI 65251	43-0654876	501 C (3)	303,964.	0.			GENERAL SUPPORT
WINGS FOR LIFE USA - SPINAL CORD RESEARCH FOUNDATION, INC 1630 STEWART ST - SANTA MONICA, CA							
90404	81-4795399	501 C (3)	7,750.	0.			GENERAL SUPPORT
WOMEN'S BAR FOUNDATION OF MASSACHUSETTS - 105 CHAUNCY ST -							
BOSTON, MA 02111	04-3228055	501 C (3)	6,100.	0.			GENERAL SUPPORT
WOMEN'S HOUSING AND ECONOMIC DEVELOPMENT CORPORATION - 50 E							
168TH ST BRONX, NY 10452	11-3099604	501 C (3)	9,280.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	<b>(b)</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
WOUNDED WARRIOR PROJECT, INC. 4899 BELFORT RD STE 300							
JACKSONVILLE, FL 32256	20-2370934	501 C (3)	7,156.	0.			GENERAL SUPPORT
YALE UNIVERSITY 157 CHURCH ST NEW HAVEN, CT 06510	06-0646973	501 C (3)	11,922.	0.			GENERAL SUPPORT
YESHIVA ELEMENTARY, INC. 7902 CARLYLE AVE MIAMI BEACH, FL 33141	65-0063045	501 C (3)	5,801.	0.			GENERAL SUPPORT
YMCA OF SOUTH FLORIDA 730 NW 107 AVENUE STE 200 MIAMI, FL 33172		501 C (3)	45,034.	0.			GENERAL SUPPORT
YOUNG ISRAEL OF GREATER MIAMI 990 NE 171ST ST NORTH MIAMI BEACH, FL 33162	59-6033985	501 C (3)	10,000.	0.			GENERAL SUPPORT
YOUNG MUSICIANS ORGANIZATION, INC 1260 SW 29TH ST STE 103 MIAMI, FL 33142	46-2610764	501 C (3)	11,724.	0.			GENERAL SUPPORT
YOUTH CO-OP, INC. 5040 NW 7 STREET, SUITE 300 MIAMI, FL 33126	23-7320351	501 C (3)	165,026.	0.			GENERAL SUPPORT
YOUTH RENEWAL FUND 1460 BROADWAY NEW YORK, NY 10036	13-3641489	501 C (3)	58,400.	0.			GENERAL SUPPORT
YWCA SOUTH FLORIDA, INC. 351 NW 5TH ST MIAMI, FL 33128	59-0624450	501 C (3)	247,989.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	<b>(b)</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
OO MIAMI FOUNDATION, INC.							
2400 SW 152ND ST							
IAMI, FL 33177	59-6192814	501 C (3)	13,270.	0.			GENERAL SUPPORT

(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
Part IV Supplemental Information. Provide the informat	tion required in Part I, lin	e 2; Part III, columr	n (b); and any other ac	dditional information.	
PART I, LINE 2:					
THE FUNDS ARE MONITORED BY THE	COMMUNITY I	MPACT GROU	JP AND A CO	MMITTEE	
OF VOLUNTEERS THAT REVIEW THE	PROGRAMMATIC	DELIVERA	BLES AND AL	SO THE	
FISCAL HEALTH OF THE ORGANIZAT				-	
ISCAL REALTH OF THE ORGANIZAT	ION•				

### 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.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

UNITED WAY MIAMI INC.

Employer identification number 59-0830840

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> 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			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
_				
3	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.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	4-		х
a	Receive a severance payment or change-of-control payment?	4a		X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b 4c		X
C	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.	40		
	The storary of lines 4a-c, list the persons and provide the applicable amounts for each item in Fart 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	The organization?	5a		Х
	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:			
а	The organization?	6a		Х
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			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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 109 compensati			C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	compensation incentive reporta		(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) MARIA ALONSO	(i)	0.	0.	263,671.	1,246.	0.	264,917.	0.
PRESIDENT & CEO (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CARLOS MOLINA	(i)	208,955.	0.	24,191.	13,762.	11,478.	258,386.	0.
CHIEF FINANCIAL & ADMINISTRATIVE OFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SYMERIA T. HUDSON	(i)	155,384.	0.	84,167.	0.	7,019.	246,570.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARY DONWORTH	(i)	187,922.	0.	15,509.	17,222.	7,102.	227,755.	0.
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) OCTAVIO ZUBIZARRETA	(i)	216,874.	0.	0.	2,477.	7,580.	226,931.	0.
INTERIM PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NORIE DEL VALLE	(i)	175,768.	0.	11,725.	9,718.	7,025.	204,236.	0.
CHIEF STRATEGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GLADYS MONTES	(i)	153,716.	0.	13,967.	8,920.	6,886.	183,489.	0.
GROUP V.P., CENTER FOR EXCELLENCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) CELIO ROMANACH	(i)	162,927.	0.	7,835.	9,965.	1,424.	182,151.	0.
INTERIM SVP, MARKETING AND COMMUNICA	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) BLANCO CRISTINA	(i)	139,852.	0.	0.	4,196.	5,319.	149,367.	0.
CHIEF COMMUNICATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(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.

2022
Open to Public Inspection

Name of the organization

UNITED WAY MIAMI INC.

Employer identification number 59-0830840

Part I Bond Is	sues SI	EE PART VI	FOR COLUM	NS (A) Al	1D (F)	CONTI	NUATIONS	5						
	a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	d (e) Issu	ie price	(f) Descript	ion of purpose	(g) Defeased (h) On behalf of issuer			(i) Po finan		
									Yes	No	Yes	No	Yes	No
MIAMI DA	DE COUNTY						MIAMI DA	DE						
A INDUSTR	AL DEVELOPMENT A	59-1662816	NONE	12/12/12	15,4	115,000.	INDUSTRI	AL DEVELO		Х		Х		X
В														ı
С														
D														İ
Part II Procee	ds .			ı.			L							
					1		В	С				D		
1 Amount of be	onds retired			7,05	8,261.									
2 Amount of bo	nds legally defeased													
3 Total procee	ds of issue			15,41	L5,000.									
4 Gross procee	ds in reserve funds													
5 Capitalized in	terest from proceeds													
6 Proceeds in	efunding escrows													
7 Issuance cos	ts from proceeds			23	38,090.									
8 Credit enhan	cement from proceeds													
9 Working cap	tal expenditures from proceeds													
10 Capital expe	nditures from proceeds													
11 Other spent	proceeds													
12 Other unsper	t proceeds													
13 Year of subs	antial completion			2	2012									
				Yes	No	Yes	No	Yes	No		Yes		No	
	ds issued as part of a refunding	•	•											
if issued prio	to 2018, a current refunding iss	ue)?		Х										
	ds issued as part of a refunding		• •											
	o 2018, an advance refunding is				X									
	allocation of proceeds been mad			Х										
17 Does the org	anization maintain adequate boo	ks and records to su	pport the											
final allocation	n of proceeds?			Х										

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

Schedule K (Form 990) 2022

Par	t III Private Business Use								
			4	E	3		C	1	)
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?		Х						
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?		X						
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?		X						
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		%		%		%		%
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,								
	another section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or						•		
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9									
_	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								
			4	Е	3	С		I	)
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?		Х						
2	If "No" to line 1, did the following apply?						•		
	Rebate not due yet?		Х						
	Exception to rebate?		Х						
	No rebate due?		Х						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was				•		•		•
	performed								
3		X							
3	Is the bond issue a variable rate issue?	Х							

Schedule K (Form 990) 2022 UNITED WAY MIAMI INC.	hedule K (Form 990) 2022 UNITED WAY MIAMI INC. 59-0830840 Page:							
Part IV Arbitrage (continued)								
	, and the second	١	E	3	(	Ç		)
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?		X						
<b>b</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)?		X						
<b>b</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	١	E	В		C		ַ
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	s on Schedul	e K. See inst	ructions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: MIAMI DADE COUNTY INDUSTRIAL DE								
(F) DESCRIPTION OF PURPOSE: MIAMI DADE INDUSTRIA	L DEVE	COPMENT						
SCHEDULE K PART II								
REFINANCING DEBT INCLUDING A SWAP AGREEMENT WITH								
IN DECEMBER 2012, UNITED WAY EXECUTED A REFINANC								
UNITED, ("BONDHOLDER") AND THE MIAMI-DADE COUNTY	INDUST	RIAL D	EVELOPI	1ENT				
AUTHORITY IN CONJUNCTION WITH THE ISSUANCE OF TH	E TAX-I	EXEMPT	REVENUE	€				
REFUNDING BONDS, PAR VALUES TOTALING \$15,415,000	• PURSU	JANT TO	THE					,
BONDHOLDER LOAN AGREEMENT, UNITED WAY USED BOND								
THEN OUTSTANDING PRINCIPAL BALANCE, 13,615,000,	OF THE	ISSUER	R LOAN.	IN				
CONNECTION WITH THE TRANSACTION INTTED WAY INCII	RRED BO	ND COS	TTS OF			-		-

AMORTIZED UNDER THE STRAIGHT LINE METHOD OVER THE LIFE OF THE BONDS. AS OF JUNE 30, 2019, THE REMAINING UNAMORTIZED LOAN COSTS WAS

INSIGNIFICANT. THE EFFECTIVE INTEREST RATE OF THE NEW DEBT WITH BANK UNITED IS 2.32% PER ANNUM.

\$238,090 OF WHICH \$165,783 WAS CAPITALIZED AS LOAN COSTS AND IS

EFFECTIVE DECEMBER 12, 2017, THE BONDHOLDER LOAN WAS AMENDED TO MODIFY

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. (continued)
CERTAIN FINANCIAL COVENANTS AND THE EFFECTIVE INTEREST RATE TO 2.54%,
ALONG WITH EXTENDING THE MATURITY DATE THROUGH DECEMBER 2032.
EFFECTIVE JANUARY 1, 2018, THE NEW TAX REFORM TOOK PLACE, AFFECTING
INTEREST RATES OF ESTABLISHED TAX-EXEMPT BANK-OWED DEBT, REQUIRING TO
INCREASE TO CORPORATE DEBT INTEREST RATE DUE TO THE DECREASE IN THE
MARGINAL CORPORATE INCOME TAX RATE FROM 39% TO 21% AND FAILURE TO
IMPLEMENT THE RATE CHANGE COULD CAUSE THE BONDS TO BECOME TAXABLE. IN
MAY 2018, THE ORGANIZATION ENTERED INTO AN INTEREST RATE ADJUSTMENT
WITH BANK UNITED FOR AN INTEREST RATE ADJUSTMENT BASED ON A TAX RATE
CHANGE. THE INTEREST RATE ADJUSTMENT WOULD RESULT IN AN ADJUSTMENT IN
THE INTEREST RATE TO 3.08%. THE INTEREST START DATE IS AS OF JUNE 12,
2018, WITH THE FIRST PAYMENT DUE ON JULY 12, 2018.

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

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.

Open to Public Inspection

UNITED WAY MIAMI INC.

**Employer identification number** 59-0830840

Pai	rt 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 de noncash contribu		-	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	40,111	4,012,390.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
•••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( WINE )	X	0	204,959.				
26	Other ( $MISCELANEOUS OT$ )	X	0	528.	FMV			
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organiz		-					
	for which the organization completed Form 828	33, Part V, L	Oonee Acknowledg	ement <b>29</b>			. 1	
	B : 11				1 00 11 11	Y	es	No
30a	During the year, did the organization receive by							
	must hold for at least 3 years from the date of t			•		20-		Х
	exempt purposes for the entire holding period?	·				30a		
	If "Yes," describe the arrangement in Part II.  Does the organization have a gift acceptance p	nalicy that =	oquires the review	of any nonetandard contribe	rtions?	24	x	
31	Does the organization have a gift acceptance properties of the organization hire or use third parties of the organization hire or use third parties of the organization hire or use the organization have a gift acceptance properties of the organization hire or use the organization have a gift acceptance properties of t					31		
J∠d				· ·		32a		Х
h	If "Yes," describe in Part II.					JZ4		
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked			
55	describe in Part II.	o.a.i.ii (0 <i>)</i> 10	a type of propert	y 101 Willion Column (a) is one	onou,			
	accondo ni i dicin							

Schedule M (Form 990) 2022

232142 09-09-22

## 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.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

UNITED WAY MIAMI INC.

Employer identification number 59-0830840

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

OTHER COMMUNITY PROJECTS

EXPENSES \$ 24,730,077. INCL GRANTS OF \$ 24,015,046. REVENUE \$ 447,409.

UPSKILL MIAMI

EXPENSES \$ 613,786. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MISSION UNITED

EXPENSES \$ 621,873. INCLUDING GRANTS OF \$ 83,868. REVENUE \$ 0.

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

PRIOR TO FILING, THE FORM 990 IS REVIEWED BY THE TREASURER AND PRESIDENT FOR ACCURACY.

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

MONITORING AND ENFORCING POLICIES ANNUALLY. THE POLICIES ARE PRESENTED AND DISCUSSED WITH ALL MEMBERS AND EACH INDIVDUAL SIGNS A CERTIFICATE STATING READING AND UNDERSTANDING THE POLICIES.

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

THE EXECUTIVE COMPENSATION COMMITTEE, A SUB-COMMITTEE OF THE BOARD, REVIEWS

THE COMPARABLE DATA GATHERED BY STAFF WITH RESPECT TO CEO AND OFFICERS. THE

COMMITTEE PRESENTS THEIR FINDINGS AND RECOMMENDATIONS TO THE BOARD.

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

PROCESS GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC. THE

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

UNITED WAY MIAMI INC.	59-0830840
ORGANIZATION MAKES AVAILABLE THE FORM 990, THE FINANCIAL	STATEMENTS AND
THEIR FEDERAL AND FLORIDA EXEMPTION CERTIFCATIONS THROUGH	THEIR WEBSITE.
THE FOLLOWING DOCUMENTS ARE AVAILABLE UPON REQUEST: GOVER	NING DOCUMENTS AND
CONFLICT OF INTEREST POLICY.	
FORM 990, PART XII, LINE 2C:	
ORGANIZATION'S FINANCIAL STATEMENTS AND REPORTING. THE OR	GANIZATION'S
FINANCIAL STATEMENTS FOR THE FISCAL YEAR ENDED 6/30/2023	WERE AUDITED
ON A CONSOLIDATED BASIS. IN ADDITION, THE ORGANIZATION HA	S AN AUDIT
SUB-COMMITTEE THAT OVERSEES THE AUDIT PROCESS AND ASSUMES	
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIA	L 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.

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization UNITED WAY MIAMI INC. Employer identification number 59-0830840

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			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	7				
33129	PARKING	FLORIDA			UNITED WAY
3250 REAL ESTATE HOLDINGS LLC - 59-0830840					
3250 SW 3RD AVENUE					
MIAMI, FL 33129	PROPERTY MAIN	FLORIDA			UNITED WAY
JNITED WAY REAL PROPERTY HOLDINGS LLC -					
59-0830840, 3250 SW 3RD AVENUE , MIAMI, FL	7				
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>(b)</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	<b>g)</b> 512(b)(13) trolled tity?
		,		501(c)(3))		Yes	No
							<u> </u>

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

Part I Continuation of Identification of Disregarded Entities

Primary activity  CHARITABLE	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
CHARITABLE	foreign country)			entity
CHARITABLE				ļ
CHARITABLE				<del>                                     </del>
CHARITABLE				
CHARITABLE	L			
	FLORIDA			UNITED WAY
PARKING	FLORIDA			UNITED WAY
PROPERTY MANAGEMENT	FLORIDA			UNITED WAY
REAL ESTATE	FLORIDA			UNITED WAY
<del> </del>				
<del> </del>				
<del> </del>				

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.

<u> </u>	· · · · · ·									_		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gene	ral or P	Percentage ownership
of related organization		(state or foreign	entity	related, unrelated, lexcluded from tax under	income	end-of-year assets	alloca	ations?	amount in box	partr	ner?	ownership
		country)		sections 512-514)		833013	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes	No	
	1											
	1											
	1											
										$\Box$		
	1											
	1											
	-											
										$\vdash$	-	
										Ш		
	]											
	1											
										_		

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>(b)</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	Sect 512(b contro enti	tion b)(13) olled ity?
		country)		or tructy		400010		Yes	No
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Yes No

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

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 r	elated organizations listed	in Parts II-IV?		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	
b	Gift, grant, or capital contribution to related organization(s)				1b	
С	Gift, grant, or capital contribution from related organization(s)				1c	
					1d	
е	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	
					1i	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	)			11	
m					1m	
					1n	
					<b>1</b> 0	
р	Reimbursement paid to related organization(s) for expenses				1p	
d Loans or loan guarantees by related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) s Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to related organization(s)  of Other transfer of cash or property to m related organization(s)  of Other transfer of cash or property to make the instructions for information on who must complete this line, including covered relationships and transaction thresholds.  (a)  Name of related organization  (b)  Transaction  (c)  Amount involved  Method of determining amount involved i				1q		
r	Other transfer of cash or property to related organization(s)				1r	
					1s	
2					•	
	Name of related organization Transa	action		(d) Method of determining amount invo	olved	
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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) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partners 501 (c orgs	) all s sec. )(3)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	Dispi tio alloca	n) ropor- nate itions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana partr	ral or P	(k) Percentage ownership
				res	NO			Yes	NO	(, 51111 1535)	res	NO	
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