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Part III

Statement of Program Service Accomplishments










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

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1	Briefly describe the organization's mission				
UNITED WAY OF PALM BEACH COUNTY'S MISSION IS TO IMPROVE MEASURABLY THE LIVES OF INDIVIDUALS AND FAMILIES IN PALM BEACH COUNTY BY UNITING THE RESOURCES OF DONORS, VOLUNTEERS, AGENCIES AND THE COMMUNITY CONTINUED ON SCHEDULE O					
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?				
			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If "Yes," describe these new services on Schedule O					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?				
			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 \$ 1,853,805	including grants of \$ 1,853,805 )	(Revenue \$ )	
EDUCATION IMPACT AREA RECEIVING A QUALITY EDUCATION IS NOT ONLY A SIGNIFICANT PREDICTOR OF WHETHER OR NOT YOUTH WILL ACHIEVE THEIR FULL POTENTIAL, BUT ALSO CLOSELY RELATES TO THEIR ABILITY TO BE SELF-SUFFICIENT AS ADULTS. WHILE WE HAVE MADE STRIDES IN IMPROVING THE ABILITY OF PALM BEACH COUNTY'S CHILDREN TO SUCCEED AT CRITICAL POINTS IN THEIR LIVES, THERE IS STILL MUCH WORK TO BE DONE. THAT'S WHY UNITED WAY IS SUPPORTING PROGRAMS THAT HELP OUR YOUTH GRADUATE ON TIME AND SUCCESSFULLY TRANSITION TO WORK OR TO COLLEGE. GOALS * INCREASE THE NUMBER OF YOUTH READING ON GRADE LEVEL * INCREASE THE NUMBER OF YOUTH WHO GRADUATE ON TIME * INCREASE THE NUMBER OF 18-24 YEAR OLD YOUTH EMPLOYED OR IN POST-SECONDARY EDUCATION AFTER HIGH SCHOOL GRADUATION. KEY STRATEGY FUND PROGRAMS THAT PROMOTE LITERACY EDUCATION, ACADEMIC SUPPORT, EMPLOYMENT SKILLS TRAINING AND COACHING. RESULTS FUNDING \$1,853,805 * UNITED WAY SUPPORTED 18 PROGRAMS FOCUSED ON HELPING PALM BEACH COUNTY YOUTH ACHIEVE THEIR POTENTIAL.					
4b	(Code )	(Expenses \$ 1,603,567	including grants of \$ 1,603,567 )	(Revenue \$ )	
HEALTH IMPACT AREA BEING HEALTHY IS VITAL, MAKING IT POSSIBLE FOR YOUTH TO BE SUCCESSFUL AND FOCUSED AT SCHOOL, INDIVIDUALS TO BE PRODUCTIVE AT WORK, AND FOR ALL TO LIVE A GOOD LIFE. FOR MANY, HOWEVER, ACCESS TO QUALITY HEALTH CARE SEEMS LIKE AN UNATTAINABLE LUXURY. GOALS * INCREASE THE NUMBER OF PALM BEACH COUNTY RESIDENTS WITH HEALTH INSURANCE * INCREASE THE NUMBER OF PALM BEACH COUNTY RESIDENTS WITH ACCESS TO COMPREHENSIVE HEALTH CARE SERVICES * INCREASE THE AVAILABILITY AND USE BY PALM BEACH COUNTY RESIDENTS OF COMPREHENSIVE HEALTH CARE SERVICES. KEY STRATEGY FUND PROGRAMS THAT OFFER HEALTH INSURANCE ENROLLMENT, ACCESSING COMPREHENSIVE HEALTH CARE SERVICES AND DISEASE MANAGEMENT EDUCATION. RESULTS FUNDING \$1,603,567 * UNITED WAY SUPPORTED 11 PROGRAMS FOCUSED ON IMPROVING ACCESS TO HEALTH CARE FOR PALM BEACH COUNTY RESIDENTS.					
4c	(Code )	(Expenses \$ 1,245,980	including grants of \$ 1,245,980 )	(Revenue \$ )	
ECONOMIC SUCCESS MEANS BEING SELF-SUFFICIENT AND ABLE TO MEET BASIC NEEDS FOR THINGS SUCH AS FOOD AND SHELTER. IN LARGE PART DUE TO THE ECONOMIC DOWNTURN, MANY PEOPLE, NOW MORE THAN EVER, ARE OVERWHELMED BY THE COSTS OF EVERYDAY LIVING SUCH AS FOOD, HOUSING, HEALTH CARE, CHILD CARE, TRANSPORTATION, AND INSURANCE. GOALS * INCREASE ACCESS TO BASIC NEEDS SERVICES FOR LOW-INCOME INDIVIDUALS AND FAMILIES IN CRISIS (RENT/MORTGAGE, UTILITY, FOOD ASSISTANCE) * REDUCE THE NUMBER OF INDIVIDUALS AND FAMILIES THAT ARE LOW-INCOME BY SUPPORTING LONG-TERM FINANCIAL STABILITY PROGRAMMING THAT INCREASES INCOME, BUILDS SAVINGS AND PROMOTES ASSET DEVELOPMENT. KEY STRATEGY FUND PROGRAMS THAT OFFER BASIC NEEDS SERVICES, BENEFITS ENROLLMENT AND SCREENING, FINANCIAL STABILITY EDUCATION, CREDIT COUNSELING AND EMPLOYMENT SUPPORT. RESULTS FUNDING \$1,245,980 * UNITED WAY SUPPORTED 26 PROGRAMS FOCUSED ON PROVIDING BASIC NEEDS ASSISTANCE AND IMPROVING FINANCIAL STABILITY FOR PALM BEACH COUNTY RESIDENTS.					
	(Code )	(Expenses \$ 6,218,120	including grants of \$ 6,218,120 )	(Revenue \$ )	
DONOR DESIGNATIONS TO OTHER AGENCIES					
	(Code )	(Expenses \$ 1,165,384	including grants of \$ 1,165,384 )	(Revenue \$ 527,582 )	
OTHER PROGRAM EXPENSES					
	(Code )	(Expenses \$ 479,632	including grants of \$ 479,632 )	(Revenue \$ )	
OTHER INITIATIVES					
	(Code )	(Expenses \$ 26,000	including grants of \$ 26,000 )	(Revenue \$ )	
ALLOCATIONS TO OTHER AGENCIES - DONOR ADVISED FUNDS					
4d	Other program services (Describe in Schedule O )				
	(Expenses \$ 7,889,136	including grants of \$ 7,889,136 )	(Revenue \$ 527,582 )		
4e	Total program service expenses		12,592,488		

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

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		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	10	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c			
2a		61	
2b		Yes	
3a			No
3b			
4a			No
b			
5a			No
5b			No
5c			
6a			No
6b			
7 Organizations that may receive deductible contributions under section 170(c).			
7a		Yes	
7b		Yes	
7c			No
7d			
7e			No
7f			No
7g			
7h			
8			No
9 Sponsoring organizations maintaining donor advised funds.			
9a			No
9b			No
10 Section 501(c)(7) organizations. Enter			
10a			
10b			
11 Section 501(c)(12) organizations. Enter			
11a			
11b			
12a			
12b			
13a			
13b			
13c			
14a			No
14b			

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✔ Own website    ✔ Another's website    ✔ Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶TRUDY CROWETZ VP 2600 QUANTUM BOULEVARD BOYNTON BEACH,FL 33426 (561) 375-6619

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]



## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	411,126	0	50,512

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

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b> Yes	
<b>4</b>	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b> Yes	
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . .	1a178,413			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c			
	d	Related organizations . . . . .	1d			
	e	Government grants (contributions)	1e2,234,257			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f12,337,442			
	g	Noncash contributions included in lines 1a-1f \$	87,946			
	h	Total. Add lines 1a-1f . . . . .		14,750,112		
Program Service Revenue	2a	Business Code	0			
	b		0			
	c		0			
	d		0			
	e		0			
	f	All other program service revenue	0	0	0	0
	g	Total. Add lines 2a-2f . . . . .	0			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	116,815		
4		Income from investment of tax-exempt bond proceeds . . . . .	0			
5		Royalties . . . . .	0			
6a		Gross rents	(i) Real(ii) Personal			
b		Less rental expenses				
c		Rental income or (loss)	00			
d		Net rental income or (loss) . . . . .	0			
7a		Gross amount from sales of assets other than inventory	(i) Securities(ii) Other			
b		Less cost or other basis and sales expenses	2,955,345			
c		Gain or (loss)	2,993,024			
d		Net gain or (loss) . . . . .	-37,6790			
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a			
b		Less direct expenses . . . . .	b			
c		Net income or (loss) from fundraising events . . . . .	0			
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a			
b		Less direct expenses . . . . .	b			
c		Net income or (loss) from gaming activities . . . . .	0			
10a		Gross sales of inventory, less returns and allowances . . . . .	a			
b		Less cost of goods sold . . . . .	b			
c		Net income or (loss) from sales of inventory . . . . .	0			
Miscellaneous Revenue		Business Code				
11a	DESIGNATION FEES	900099	527,582	527,582		
b			0			
c			0			
d	All other revenue . . . . .		0	0	0	0
e	Total. Add lines 11a-11d . . . . .		527,582			
12	Total revenue. See Instructions . . . . .		15,356,830	527,582	0	79,136

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	11,414,104	11,414,104		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	260,859	47,134	138,516	75,209
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	1,782,339	505,343	592,228	684,768
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	85,007	15,221	35,074	34,712
9	Other employee benefits.	247,367	65,201	89,478	92,688
10	Payroll taxes.	174,170	46,612	65,553	62,005
11	Fees for services (non-employees):				
a	Management.	252,716	140,549	53,941	58,226
b	Legal.	0			
c	Accounting.	57,750	0	49,000	8,750
d	Lobbying.	0			
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	0	0	0	0
12	Advertising and promotion.	0			
13	Office expenses.	72,966	25,687	12,498	34,781
14	Information technology.	0			
15	Royalties.	0			
16	Occupancy.	158,580	71,666	32,771	54,143
17	Travel.	47,061	11,594	4,297	31,170
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	35,316	9,366	7,669	18,281
20	Interest.	11,234	0	11,234	0
21	Payments to affiliates.	112,185	60,064	19,646	32,475
22	Depreciation, depletion, and amortization.	155,019	69,991	32,136	52,892
23	Insurance.	62,657	28,290	12,989	21,378
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	PRINTING AND PUBLICATIONS	112,576	28,114	12,392	72,070
b	RENTAL AND MAINTENANCE	89,464	39,390	20,262	29,812
c	SPECIAL EVENTS	57,361	9,317	0	48,044
d	BANK, PROCESSING FEES	128,435	0	1,172	127,263
e	All other expenses	16,474	4,845	3,969	7,660
25	Total functional expenses. Add lines 1 through 24e.	15,333,640	12,592,488	1,194,825	1,546,327
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0			

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		4,490	1	4,474
	2	Savings and temporary cash investments		2,206,641	2	2,147,851
	3	Pledges and grants receivable, net		3,498,953	3	3,144,824
	4	Accounts receivable, net		256,192	4	19,078
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		42,203	9	45,178
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a3,966,574			
	b	Less accumulated depreciation	10b1,683,482	2,419,868	10c	2,283,092
	11	Investments—publicly traded securities		5,714,530	11	6,607,131
	12	Investments—other securities See Part IV, line 11		0	12	0
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		800,781	15	895,210
	16	Total assets. Add lines 1 through 15 (must equal line 34)		14,943,658	16	15,146,838
Liabilities	17	Accounts payable and accrued expenses		201,650	17	167,770
	18	Grants payable		5,609,578	18	4,982,840
	19	Deferred revenue		381,904	19	593,951
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		141,515	25	133,216
	26	Total liabilities. Add lines 17 through 25		6,334,647	26	5,877,777
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		5,131,753	27	6,017,368
	28	Temporarily restricted net assets		3,438,280	28	3,206,830
	29	Permanently restricted net assets		38,978	29	44,863
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		8,609,011	33	9,269,061
	34	Total liabilities and net assets/fund balances		14,943,658	34	15,146,838

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	15,356,830
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	15,333,640
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	23,190
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	8,609,011
5	Net unrealized gains (losses) on investments . . . . .	5	778,298
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	-141,438
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,269,061

Part XII Financial Statements and Reporting

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

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

## Additional Data

**Software ID:** 13000248  
**Software Version:** 2013v3.1  
**EIN:** 59-0683258  
**Name:** UNITED WAY OF PALM BEACH COUNTY INC

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FIGG ESQ DANET RODRIGUEZ LEGAL COUNSEL	2 00	X		X				0	0	0
KISELEWSKI DONALD BOARD CHAIR ELECT	2 00	X		X				0	0	0
MENOR ARTHUR J ESQ IMMEDIATE PAST CHAIR	2 00	X		X				0	0	0
MURTAUGH DR KRISTEN O SECRETARY	2 00	X		X				0	0	0
SHEAROUSE III JOSEPH B BOARD CHAIR	3 00	X		X				0	0	0
STEVE MCDERMOTT TREASURER	2 00	X		X				0	0	0
ADARVE LUIS BOARD MEMBER	2 00	X						0	0	0
BELOUS STEVE BOARD MEMBER	2 00	X						0	0	0
BERNSTEIN SETH B BOARD MEMBER	2 00	X						0	0	0
BREGMAN ESQ HOWARD BOARD MEMBER	2 00	X						0	0	0
BRENNAN JOE BOARD MEMBER	2 00	X						0	0	0
BRONSON CRESSMAN BOARD MEMBER	2 00	X						0	0	0
BROWN LARRY E BOARD MEMBER	2 00	X						0	0	0
BRUMLEY FABIOLA BOARD MEMBER	2 00	X						0	0	0
CANE DANIEL BOARD MEMBER	2 00	X						0	0	0
CASA-CELAYA MARTA VOLUNTEER CENTER CHAIR	2 00	X						0	0	0
COCUY JUAN BOARD MEMBER	2 00	X						0	0	0
COMPIANI FRANK BOARD MEMBER	2 00	X						0	0	0
DENNY SUSAN BOARD MEMBER	2 00	X						0	0	0
EBBOLE GAETANA BOARD MEMBER	2 00	X						0	0	0
ELLISON JR EARNIE BOARD MEMBER	2 00	X						0	0	0
ELMORE GEORGE T BOARD MEMBER	2 00	X						0	0	0
FISCHETTI JOHN BOARD MEMBER	2 00	X						0	0	0
FLANIGAN ESQ JOHN F BOARD MEMBER	2 00	X						0	0	0
HAMILTON III DAVID L BOARD MEMBER	2 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAUTENBACH SHERRY BOARD MEMBER	2 00	X						0	0	0
LEVINSON JON R BOARD MEMBER	2 00	X						0	0	0
LINK ESQ WENDY SARTORY BOARD MEMBER	2 00	X						0	0	0
MARIACA SERGIO A BOARD MEMBER	2 00	X						0	0	0
MCGAHEE TALLA BOARD MEMBER	2 00	X						0	0	0
OBERLINK CHRISTINE BOARD MEMBER	2 00	X						0	0	0
OSWALD KEITH RICHARD BOARD MEMBER	2 00	X						0	0	0
PARKES-BRIER EVELYN F BOARD MEMBER	2 00	X						0	0	0
RAY GAIL D BOARD MEMBER	2 00	X						0	0	0
RYAN DONNA BOARD MEMBER	2 00	X						0	0	0
RYAN DONNA BOARD MEMBER	2 00	X						0	0	0
WADE RICKY BOARD MEMBER	2 00	X						0	0	0
WASSERMAN STEVEN BOARD MEMBER	2 00	X						0	0	0
ERICKSON MARK CFO	40 00			X				98,293	0	13,690
GEORGE LAURA INTERIM CEO (AS OF 6/10/2013) CEO AS OF 11/21/13	40 00			X				128,861	0	15,721
CHUCK ANDERSON CEO (THROUGH 6/10/13)	40 00						X	183,972	0	21,101

SCHEDULE A

(Form 990 or 990EZ)

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. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization UNITED WAY OF PALM BEACH COUNTY INC	Employer identification number 59-0683258
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Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2

☐

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% 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<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I 

b

☐

Type II 

c

☐

Type III - Functionally integrated 

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2013



Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	14,794,047	15,103,710	13,032,556	13,062,745	14,750,112	70,743,170
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	14,794,047	15,103,710	13,032,556	13,062,745	14,750,112	70,743,170
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)						4,000,795
6 Public support. Subtract line 5 from line 4						66,742,375

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	14,794,047	15,103,710	13,032,556	13,062,745	14,750,112	70,743,170
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	143,802	148,375	138,496	139,081	116,815	686,569
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )	0	0	0			0
11 Total support (Add lines 7 through 10)						71,429,739
12 Gross receipts from related activities, etc (see instructions)					12	1,868,560
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . .						▶

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	93 440 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	92 960 %
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶	
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	▶	
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	▶	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶	

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test	
Return Reference	Explanation
Schedule A, Part II, Line 10, Other Income	DESCRIPTION - , COLUMN A - , COLUMN B - , COLUMN C - , COLUMN D - , COLUMN E - , COLUMN F - 0,

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No 1545-0047  
**2013**  
**Open to Public Inspection**

<b>Name of the organization</b> UNITED WAY OF PALM BEACH COUNTY INC	<b>Employer identification number</b>  59-0683258
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**Part I**

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

	<b>(a)</b> Donor advised funds	<b>(b)</b> Funds and other accounts
<b>1</b> Total number at end of year	1	
<b>2</b> Aggregate contributions to (during year)	0	
<b>3</b> Aggregate grants from (during year)	36,000	
<b>4</b> Aggregate value at end of year	174,148	
<b>5</b> Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	
<b>6</b> Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	

**Part II**

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

**1** Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

**2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	<b>Held at the End of the Year</b>
<b>a</b> Total number of conservation easements	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	<b>2d</b>

**3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

**5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ **Yes** ☐ **No**

**6** Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ **Yes** ☐ **No**

**9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III**

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

**1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

**(i)** Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

**(ii)** Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

**a** Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

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

Cat No 52283D

Schedule D (Form 990) 2013

Part III

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

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

☐

Public exhibition

d

☐

Loan or exchange programs

b

☐

Scholarly research

e

☐

Other

c

☐

Preservation for future generations
- 4
- Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5
- During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
- ☐

Yes

☐

No

Part IV

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

- 1a
- Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
- ☐

Yes

☐

No
- b
- If "Yes," explain the arrangement in Part XIII and complete the following table
- |    |        |
|----|--------|
|    | Amount |
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |
- c
- Beginning balance
- d
- Additions during the year
- e
- Distributions during the year
- f
- Ending balance
- 2a
- Did the organization include an amount on Form 990, Part X, line 21?
- ☐

Yes

☐

No
- b
- If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII
- ☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance . . . . .	5,544,456	5,618,592	5,731,120	4,921,158	4,535,462
b Contributions . . . . .	286,194	162,718	98,003	182,651	164,616
c Net investment earnings, gains, and losses	858,885	557,634	90,786	914,386	506,559
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .	317,261	794,488	301,317	287,075	285,479
f Administrative expenses . . . . .					
g End of year balance . . . . .	6,372,274	5,544,456	5,618,592	5,731,120	4,921,158

- 2
- Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a
- Board designated or quasi-endowment
- 97 000 %
- b
- Permanent endowment
- c
- Temporarily restricted endowment
- 3 000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a
- Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |                             |        |    |
|-----------------------------|--------|----|
|                             | Yes    | No |
| (i) unrelated organizations | 3a(i)  | No |
| (ii) related organizations  | 3a(ii) | No |
| b                           | 3b     |    |
- If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4
- Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	298,005		298,005
b	Buildings	3,365,632	1,484,906	1,880,726
c	Leasehold improvements			0
d	Equipment	302,937	198,576	104,361
e	Other			0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,283,092



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	10,005,567
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	778,298
b	Donated services and use of facilities . . . . .	2b	88,559
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	0
e	Add lines 2a through 2d . . . . .	2e	866,857
3	Subtract line 2e from line 1 . . . . .	3	9,138,710
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	6,218,120
c	Add lines 4a and 4b . . . . .	4c	6,218,120
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .	5	15,356,830

Part XII

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

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

1	Total expenses and losses per audited financial statements . . . . .	1	9,204,079
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	88,559
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	-6,218,120
e	Add lines 2a through 2d . . . . .	2e	-6,129,561
3	Subtract line 2e from line 1 . . . . .	3	15,333,640
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	0
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .	5	15,333,640

Part XIII

Supplemental Information

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

Return Reference	Explanation
Schedule D, Part V, Line 4, Intended uses of endowment funds	THE UNITED WAY BOARD OF DIRECTORS APPROVES THE TRANSFER FROM THE BOARD DESIGNATED ENDOWMENT FUND AN AMOUNT EQUAL TO 4 8% OF ITS AVERAGE VALUE OF THE PAST THREE YEARS, AS MEASURED ON DECEMBER 31ST. THE FUNDS ARE TO BE SPENT ON IMMEDIATE NEEDS OF THE ORGANIZATION.
Schedule D, Part X, Line 2, FIN 48 (ASC 740) footnote	ON JULY 29, 2009, THE ORGANIZATION IMPLEMENTED ASC 740, INCOME TAXES. ASC 740 CREATES A SINGLE MODEL TO ADDRESS UNCERTAINTY IN INCOME TAX PROVISIONS AND PRESCRIBES A MINIMUM RECOGNITION THRESHOLD. A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE ON DERECOGNITION, MEASUREMENT, CLASSIFICATION, INTEREST, AND PENALTIES, DISCLOSURE AND TRANSITION. THERE WAS NO IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS AS A RESULT OF THE IMPLEMENTATION OF ASC 740. THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE (OR REFLECT) ANY UNCERTAIN TAX POSITION.
Schedule D, Part XI, Line 4b, Other revenues in form 990 not in audited financial statements	DESIGNATIONS TO AGENCIES - 6218120,
Schedule D, Part XII, Line 2d, Other expenses in audited financial statements not in form 990	DESIGNATIONS TO AGENCIES - -6218120,

[illegible]



Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

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

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization  
UNITED WAY OF PALM BEACH COUNTY INC

Employer identification number  
59-0683258

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

208

3

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

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Return Reference	Explanation
Schedule I, Part I, Line 2, Procedures for monitoring use of grant funds	- ALLOCATION GRANTS TO OTHER AGENCIES FOR PROGRAMMING EXPENSES ARE APPROVED BY THE BOARD, RECIPIENT AGENCIES SIGN A CONTRACT THAT INCLUDES PROGRAM AND FINANCIAL MONITORING BY BOTH STAFF AND VOLUNTEERS - DONOR DESIGNATED GRANTS TO OTHER AGENCIES ARE NOT MONITORED, THERE IS NO AGREEMENT ESTABLISHED WITH RECIPIENT 501(C)3 ORGANIZATIONS - OTHER GRANT FUNDS ARE MONITORED BY STAFF, WHO REPORTS TO THE FUNDING AGENCY/FUNDER
Schedule I, Part II, Column H, Purpose of grant or assistance	THE ARC OF PALM BEACH COUNTY, 59-0883386 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,HOUSING/ COMMUNITY PARTNERSHIP INC , 59-2704597 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,ADOPT-A-FAMILY OF THE PALM BEACHES INC , 59-2471253 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,THE LORD'S PLACE INC , 59-2240502 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST INC , 65-0087858 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,UNITED CEREBRAL PALSY OF BROWARD PB & MID COAST COUNTIES, 65-0229776 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PALM BEACH COUNTY FOOD BANK, 90-0788707 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,LEGAL AID SOCIETY OF PALM BEACH COUNTY INC , 59-6046994 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,BOYS AND GIRLS CLUB OF PALM BEACH COUNTY INC , 23-7060561 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,CHILDREN'S HOME SOCIETY OF FLORIDA SOUTH COASTAL DIVISION, 59-0192430 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,COALITION FOR INDEPENDENT LIVING OPTIONS INC (CILO), 65-0174695 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PALM BEACH HABILITATION CENTER, 59-6213381 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,MILAGRO CENTER, 65-0804625 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,THE VOLEN CENTER, 59-2695062 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,FAMILIES FIRST OF PALM BEACH COUNTY INC , 45-5184288 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,CLINICS CAN HELP INC, 20-2778895 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PALM BEACH COUNTY LITERACY COALITION, 65-0169781 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,THE CHILDREN'S PLACE AT HOME SAFE INC , 59-1935485 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,FERD & GLADYS ALPERT JEWISH FAMILY & CHILDREN'S SERVICE OF, 59-1520581 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,ASPIRA OF FLORIDA INC , 59-2105537 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,MENTAL HEALTH ASSOCIATION OF PALM BEACH COUNTY INC , 59-0760220 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,COMMUNITIES IN SCHOOLS OF PALM BEACH COUNTY INC , 59-2516164 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PALM BEACH COUNTY MEDICAL SOCIETY SERVICES INC , 65-1048299 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,JEFF INDUSTRIES INC , 59-2516157 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,THE ARC OF THE GLADES, 59-1760374 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,THE GLADES INITIATIVE, 01-0733180 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,HEALTHY MOTHERS/HEALTHY BABIES COALITION OF PBC INC , 59-2657051 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,AID TO VICTIMS OF DOMESTIC ABUSE INC (AVDA), 59-2486620 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,RUTH RALES JEWISH FAMILY SERVICE OF SOUTH PALM BEACH COUNTY, 65-1115689 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,CARIDAD CENTER INC , 65-0149423 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,SEAGULL INDUSTRIES FOR THE DISABLED INC , 59-1879968 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,SALVATION ARMY OF PALM BEACH COUNTY, 58-0660607 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,COMMUNITY HEALTH CENTER OF WPB INC, 26-3611337 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,YWCA OF PALM BEACH COUNTY FLORIDA INC , 59-0751935 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,URBAN YOUTH IMPACT, 91-1901103 ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,FLORIDA FISHING ACADEMY, 16-1775538 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,NONPROFITS FIRST, 26-3189428 ALLOCATION GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,COMPASS INC, 65-0052657 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PRIME TIME PALM BEACH COUNTY, INC, 65-1071628 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,TREASURE COAST HEALTH COUNCIL INC , 59-2242689 ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,PARENT-CHILD CENTER INC , 59-1964034 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,SICKLE CELL FOUNDATION OF PALM BEACH COUNTY INC, 59-1975315 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,RESOURCE DEPOT, 65-0964759 GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT,

Additional Data

Software ID: 13000248  
Software Version: 2013v3.1  
EIN: 59-0683258  
Name: UNITED WAY OF PALM BEACH COUNTY INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1000 FRIENDS OF FLORIDA 308 N MONROE TALLAHASSEE,FL 32301	59-2761163	501(C)(3)	11,293				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
211 PALM BEACH TREASURE COAST PO BOX 3588 LANTANA, FL 33465	23-7153017	501(C)(3)	440,769				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACHIEVEMENT CENTER FOR CHILDREN AND FAMILIES 555 NW 4TH ST DELRAY BEACH,FL 33444	59-1264435	501(C)(3)	63,514				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADOPT-A-FAMILY OF THE PALM BEACHES INC 1712 2ND AVENUE NORTH LAKE WORTH,FL 33460	59-2471253	501(C)(3)	346,721				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AID TO AFRICA 6909 RIDGEWOOD AVE CHEVY CHASE, MD 20815	06-1703295	501(C)(3)	6,497				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AID TO VICTIMS OF DOMESTIC ABUSE INC (AVDA) PO BOX 6161 DELRAY BEACH, FL 33482	59-2486620	501(C)(3)	69,099				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR EATING DISORDERS AWARENESS INC 1649 FORUM PLACE 2 WEST PALM BEACH, FL 33401	65-1080905	501(C)(3)	19,094				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALZHEIMER'S COMMUNITY CARE INC 800 NORTHPOINT PKWY - STE 101B WEST PALM BEACH, FL 33407	31-1481653	501(C)(3)	8,193				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ASSOCIATION OF CAREGIVING YOUTH INC 1515 N FEDERAL HWY SUITE 214 BOCA RATON, FL 33432	65-0866677	501(C)(3)	90,867				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY - PALM BEACH COUNTY 621 CLEARWATER PARK RD WEST PALM BEACH, FL 33401	13-1788491	501(C)(3)	5,885				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE INC PO BOX 4124 NEW YORK,NY 10163	13-1656634	501(C)(3)	16,838				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS P O BOX 73857 CHICAGO, IL 60673	53-0196605	501(C)(3)	61,234				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS PALM BEACH COUNTY INC 825 FERN STREET WEST PALM BEACH, FL 33401	53-0196605	501(C)(3)	20,811				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAS CHARITIES 14150 NEWBROOK DRIVE SUITE 110 CHANTILLY,VA 20151	54-1517707	501(C)(3)	65,656				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL CHARITIES OF AMERICA PO BOX 45754 SAN FRANCISCO ,CA 94145	94-3193389	501(C)(3)	95,196				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL RESCUE LEAGUE OF THE PALM BEACHES PEGGY ADAMS 3200 N MILITARY TRAIL WEST PALM BEACH, FL 33409	59-0637811	501(C)(3)	16,548				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AREA AGENCY ON AGING OF PALM BEACHTREASURE COAST INC 4400 N CONGRESS AVENUE WEST PALM BEACH, FL 33407	65-0087858	501(C)(3)	293,189				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPIRA OF FLORIDA INC 6100 BLUE LAGOON DRIVE SUITE 460 MIAMI, FL 33126	59-2105537	501(C)(3)	95,362				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUTISM AFTER 21 PO BOX 811702 BOCA RATON, FL 33431	45-3843143	501(C)(3)	5,568				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLA'S ANGELS INC P O BOX 1562 JUPITER,FL 33468	26-1594604	501(C)(3)	19,632				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEST FOOT FORWARD 21441 BOCA RIO ROAD BOCA RATON, FL 33433	30-0598378	501(C)(3)	8,643				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG DOG RANCH RESCUE 10948 ACME RD WELLINGTON, FL 33414	26-3184971	501(C)(3)	8,775				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOCA RATON REGIONAL HOSPITAL FOUNDATION 745 MEADOWS ROAD BOCA RATON, FL 33486	59-2406425	501(C)(3)	25,127				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOY SCOUTS OF AMERICA INC GULF STREAM COUNCIL 8335 N MILITARY TRAIL PALM BEACH GDNS, FL 33410	59-0624407	501(C)(3)	30,862				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF MARTIN COUNTY 11500 SE LARES AVE HOBE SOUND, FL 33475	65-0253002	501(C)(3)	40,576				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS AND GIRLS CLUB OF PALM BEACH COUNTY INC 800 NORTHPOINT PARKWAY - STE 204 WEST PALM BEACH, FL 33407	23-7060561	501(C)(3)	182,778				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHTON HALL SCHOOL 755 N WHITNALL HIGHWAY BURBANK, CA 91505	26-0449043	501(C)(3)	10,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANCER CURE OF AMERICA - CARE UNDERSTAND RESEARCH AND END PO BOX 45754 SAN FRANCISCO ,CA 94145	81-0648432	501(C)(3)	86,761				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARE NET PREGNANCY SERVICES - TREASURE COAST 8432 S FEDERAL HIGHWAY PORT ST LUCIE,FL 34952	65-0156575	501(C)(3)	5,949				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARIDAD CENTER INC 8645 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33437	65-0149423	501(C)(3)	67,694				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARING FOR POSTAL FAMILIES INC 465 FLEMING AVE GREENACRES, FL 33463	65-0009068	501(C)(3)	25,381				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES OF THE DIOCESE OF PALM BEACH INC 9995 N MILITARY TRAIL PALM BEACH GARDENS, FL 33410	59-2470479	501(C)(3)	25,748				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR FAMILY SERVICES OF PALM BEACH COUNTY INC 4101 PARKER AVENUE WEST PALM BEACH, FL 33405	59-1084179	501(C)(3)	7,940				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABAD JEWISH CENTER OF SOUTH METRO DENVER 9950 LONE TREE PARKWAY LONE TREE,CO 80124	20-0285036	501(C)(3)	5,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAPMAN PARTNERSHIP 1550 NORTH MIAMI AVENUE MIAMI,FL 33136	65-0425069	501(C)(3)	5,540				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARITIES UNDER 1 OVERHEAD 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	27-3132554	501(C)(3)	27,433				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARITIES UNDER 5 OVERHEAD 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	27-3132492	501(C)(3)	17,747				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILD AID INTERNATIONAL 125 WASHINGTON STREET STE 201 SALEM,MA 01970	20-1358458	501(C)(3)	5,815				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN FIRST - AMERICAS CHARITIES 14150 NEWBROOK DRIVE SUITE 110 CHANTILLY,VA 20151	30-0186795	501(C)(3)	34,673				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S CHARITIES OF AMERICA PO BOX 45754 SAN FRANCISCO ,CA 94145	94-3148588	501(C)(3)	37,931				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOME SOCIETY - BROWARDINTERCOASTAL 401 NE 4TH ST FORT LAUDERDALE,FL 33301	59-0192430	501(C)(3)	9,500				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOME SOCIETY OF FLORIDA SOUTH COASTAL DIVISION 3333 FOREST HILL BLVD WEST PALM BEACH, FL 33406	59-0192430	501(C)(3)	177,969				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S MEDICAL CHARITIES OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	27-0093393	501(C)(3)	34,645				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S MEDICAL SERVICES WEST PALM BEACH FLORIDA DEPT OF HEALTH AGENCY 5101 GREENWOOD AVE WEST PALM BEACH, FL 33407	59-3502843		31,971				GRANTS TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S SERVICES COUNCIL OF PBC 2300 HIGH RIDGE ROAD BOYNTON BEACH, FL 33426	59-2773339		78,246				GRANTS TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTIAN CHARITIES USA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	94-3255961	501(C)(3)	44,848				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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CHRISTIAN SERVICE CHARITIES INC 44330 PREMIER PLAZA SUITE 220 ASHBURN, VA 20147	94-3193374	501(C)(3)	54,529				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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CHRISTIANS REACHING OUT TO SOCIETY INC (CROS) 301 1ST AVENUE SOUTH LAKE WORTH,FL 33460	59-1802917	501(C)(3)	38,304				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLINICS CAN HELP INC 1550 LATHAM RD SUITE 10 WEST PALM BEACH, FL 33409	20-2778895	501(C)(3)	114,927				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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COALITION FOR INDEPENDENT LIVING OPTIONS INC(CILO) 6800 FOREST HILL BLVD WEST PALM BEACH, FL 33413	65-0174695	501(C)(3)	150,858				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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COALITION TO EDUCATE ALTERNATIVES TO SENSELESS EUTHANASIA 5801 CAMINO DEL SOL 300 BOCA RATON,FL 33433	26-0077087	501(C)(3)	18,965				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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COMMUNITIES IN SCHOOLS OF PALM BEACH COUNTY INC 1660 SOUTHERN BLVD SUITE N WEST PALM BEACH, FL 33406	59-2516164	501(C)(3)	85,927				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY HEALTH CENTER OF WPB INC 2100 W 45TH STREET SUITE A8/9 WEST PALM BEACH, FL 33407	26-3611337	501(C)(3)	53,712				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY HEALTH CHARITIES 1240 N PITT ST STE 300 ALEXANDRIA,VA 22314	13-6167225	501(C)(3)	257,038				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY HEALTH CHARITIES OF FLORIDA INC 15 A CRESCENT WAY CRAWFORDVILLE, FL 32326	59-3218006	501(C)(3)	70,137				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMPASS INC 201 N DIXIE HWY LAKE WORTH, FL 33460	65-0052657	501(C)(3)	29,359				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION & PRESERVATION CHARITIES OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	94-3217738	501(C)(3)	9,907				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELRAY BEACH CENTER FOR THE ARTS AT OLD SCHOOL SQUARE INC 51 N SWINTON AVENUE DELRAY BEACH DELRAY BEACH,FL 33444	65-0032803	501(C)(3)	5,580				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DENVER ZOOLOGICAL FOUNDATION 2300 STEELE ST DENVER, CO 80205	84-0502539	501(C)(3)	5,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISASTER RECOVERY COALITION 50 S MILITARY TRL SUITE 201 WEST PALM BEACH, FL 33415	20-4595245	501(C)(3)	25,000				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DO UNTO OTHERS AMERICAS EMERGENCY RELIEF DEVEL & HUMANITARIA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	94-3148590	501(C)(3)	11,437				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOMINO'S CAT RESCUE LEAGUE INC PO BOX 1608 PALM CITY, FL 34991	81-0582632	501(C)(3)	13,251				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DR HERRELL'S INNOVATIVE RESEARCH FUND IN UROLOGY VANDERBILT U GIFT PROSSING OFFICE 2301 VANDERBILT PLACE NASHVILLE,TN 37240	62-0476822	501(C)(3)	25,100				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTHSHARE 7735 OLD GEORGETOWN ROAD SUITE 900 BETHESDA,MD 20814	52-1601960	501(C)(3)	25,056				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATE AMERICA THE EDUCATION SCHOOL SUPPORT & SCHOLARSHIP 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	94-3193387	501(C)(3)	6,147				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION FOUNDATION OF MARTIN COUNTY PO BOX 291 STUART, FL 34995	65-0304639	501(C)(3)	9,416				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION FOUNDATION OF PALM BEACH COUNTY INC 3300 FOREST HILL BLVD BUILDING E 50-116 WEST PALM BEACH, FL 33406	59-2420369	501(C)(3)	5,416				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL SOL JUIPTER'S NEIGHBORHOOD RESOURCE CENTER PO BOX 7682 JUPITER,FL 33468	01-0870672	501(C)(3)	15,569				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENVIRONMENTAL STUDIES COUNCIL INC 2900 NE INDIAN RIVER DRIVE JENSEN BEACH, FL 34990	59-2209059	501(C)(3)	6,871				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EPILEPSY FOUNDATION OF FLORIDA 3222 COMMERCE PLACE SUITE B WEST PALM BEACH, FL 33407	59-2164525	501(C)(3)	20,792				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXTENDED HANDS COMMUNITY OUTREACH INC 528 CHEERFUL STREET WEST PALM BEACH, FL 33407	03-0484951	501(C)(3)	12,314				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILIES FIRST OF PALM BEACH COUNTY INC 3333 FOREST HILL BLVD 2ND FLOOR WEST PALM BEACH, FL 33406	45-5184288	501(C)(3)	120,720				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FARMWORKERS CHILDRENS COUNCIL INC 130 ISLAND DRIVE OCEAN RIDGE,FL 33435	65-0169221	501(C)(3)	5,995				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FARMWORKERS COORDINATING COUNCIL OF PBC INC 1313 CENTRAL TERRACE LAKE WORTH,FL 33460	59-1830267	501(C)(3)	79,674				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEDING SOUTH FLORIDA -PBC WAREHOUS 2501 SW 32 TERRACE PEMBROKE PARK, FL 33023	59-2097520	501(C)(3)	23,852				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FERD & GLADYS ALPERT JEWISH FAMILY & CHILDREN'S SERVICE OF PO BOX 220627 WEST PALM BEACH, FL 33422	59-1520581	501(C)(3)	99,611				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA ATLANTIC UNIVERSITY FOUNDATION 777 GLADES ROAD ADMIN 383 BOCA RATON, FL 33431	59-0917284	501(C)(3)	18,551				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA FISHING ACADEMY 7067 PENINSULA COURT LAKE WORTH,FL 33467	16-1775538	501(C)(3)	43,817				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA OCEANOGRAPHIC SOCIETY 890 NE OCEAN BLVD STUART,FL 34996	59-1114306	501(C)(3)	12,603				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD FOR THE POOR 6401 LYONS ROAD COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	8,008				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOR THE CHILDREN INC 1718 DOUGLAS STREET LAKE WORTH,FL 33460	65-0950530	501(C)(3)	6,065				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF MACARTHUR BEACH STATE PARK 10900 JACK NICKLAUS DRIVE NORTH PALM BEACH, FL 33408	65-0196497	501(C)(3)	5,007				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS OF SOUTHEAST FLORIDA INC 1224 WEST INDIANTOWN ROAD JUPITER,FL 33458	59-0657327	501(C)(3)	7,134				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL IMPACT (CFC) PO BOX 409616 ATLANTA,GA 22314	52-1273585	501(C)(3)	32,190				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUARDIANS OF MARTIN COUNTY INC PO BOX 1489 HOBE SOUND, FL 33475	27-0302991	501(C)(3)	17,119				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HABITAT FOR HUMANITY OF PALM BEACH COUNTY 6758 N MILITARY TRAIL SUITE 301 WEST PALM BEACH, FL 33407	59-3525576	501(C)(3)	8,824				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABITAT FOR HUMANITY SOUTH PALM BEACH COUNTY 181 SE 5TH AVENUE DELRAY BEACH,FL 33483	65-0307017	501(C)(3)	14,952				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HANDS TOGETHER OF THE PALM BEACHES INC 12415 INDIAN ROAD NORTH PALM BEACH, FL 33408	20-2512245	501(C)(3)	23,560				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTH & MEDICAL RESEARCH CHARITIES OF AMERICA PO BOX 45754 SAN FRANCISCO, CA 94145	94-3217739	501(C)(3)	93,079				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTH FIRST - AMERICA'S CHARITIES 14150 NEWBROOK DRIVE SUITE 110 CHANTILLY,VA 20151	30-0186796	501(C)(3)	17,686				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HEALTHY MOTHERSHEALTHY BABIES COALITION OF PBC INC 500 GULFSTREAM BLVD SUITE 201 DELRAY BEACH,FL 33483	59-2657051	501(C)(3)	69,695				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELPING PEOPLE SUCCEED 1100 SE FEDERAL HIGHWAY STUART,FL 34994	59-1051699	501(C)(3)	31,170				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HIBISCUS CHILDREN'S CENTER 2400 NE DIXIE HWY JENSEN BEACH, FL 34957	59-2632361	501(C)(3)	10,518				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HISPANIC & LATINO CHARITIES OF THE US AND THE AMERICAS 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	68-0455509	501(C)(3)	7,292				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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HISTORICAL SOCIETY OF MARTIN COUNTY 825 NE OCEAN BLVD STUART,FL 34996	59-0913326	501(C)(3)	19,815				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HISTORICAL SOCIETY OF PALM BEACH COUNTY 139 N COUNTY ROAD PALM BEACH, FL 33480	59-6158821	501(C)(3)	26,917				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HOBE SOUND ANIMAL PROTECTION LEAGUE PO BOX 1693 PALM CITY, FL 34991	65-1015367	501(C)(3)	16,168				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HOLY GROUND SHELTER FOR HOMELESS INC 200 W 20TH STREET RIVIERA BEACH, FL 33404	26-3342975	501(C)(3)	6,618				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOMELESS COALITION OF PALM BEACH COUNTY 810 DATURA STREET BASEMENT WEST PALM BEACH, FL 33401	65-0125852	501(C)(3)	31,282				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOSPICE OF PALM BEACH COUNTY 5300 EAST AVENUE WEST PALM BEACH, FL 33407	59-1825937	501(C)(3)	11,378				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOSPICE OF PALM BEACH COUNTY FOUNDATION 5300 EAST AVENUE WEST PALM BEACH, FL 33407	20-3974070	501(C)(3)	23,125				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HOUSING COMMUNITY PARTNERSHIP INC 2001 W BLUE HERON BLVD RIVIERA BEACH, FL 33404	59-2704597	501(C)(3)	377,330				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMAN AND CIVIL RIGHTS ORGANIZATIONS OF AMERICA 125 WASHINGTON STREET STE 201 SALEM,MA 01970	94-3193388	501(C)(3)	10,508				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMAN CARE CHARITIES OF AMERICA PO BOX 45754 SAN FRANCISCO, CA 94145	94-3067804	501(C)(3)	11,251				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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HUMANE SOCIETY OF THE TREASURE COAST INC 4100 SW LEIGHTON FARM AVENUE PALM CITY, FL 34990	59-0774235	501(C)(3)	9,261				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
I HAVE A DREAM - OVERTOWN INC 5104 SW 72ND AVENUE MIAMI, FL 33155	59-3775722	501(C)(3)	8,630				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INWATER RESEARCH GROUP INC 4160 NE HYLINE DRIVE JENSEN BEACH, FL 34957	65-1090322	501(C)(3)	12,748				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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JEFF INDUSTRIES INC 115 EAST COAST AVENUE LANTANA,FL 33462	59-2516157	501(C)(3)	84,754				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JESUS HOUSE OF HOPE INC 2484 SE BONITA ST STUART, FL 34997	59-2422998	501(C)(3)	11,508				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH CHARITIES OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	68-0473577	501(C)(3)	5,021				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF NASHVILLE & MIDDLE TENNESSEE 801 PERCY WARNER BLVD SUITE 102 NASHVILLE,TN 37205	62-6077703	501(C)(3)	40,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF SOUTH FLORIDA 1130 COCONUT CREEK BLVD COCONUT CREEK, FL 33066	59-0871446	501(C)(3)	13,865				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR LEAGUE OF BOCA RATON ENDOWMENT FUND INC 261 NW 13TH STREET BOCA RATON, FL 33432	20-2240440	501(C)(3)	6,739				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR LEAGUE OF THE PALM BEACHES INC 470 COLUMBIA DRIVE BUILDING F WEST PALM BEACH, FL 33409	59-6138209	501(C)(3)	5,348				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDS BEATING CANCER INC 615 E PRINCETON STREET SUITE 400 ORLANDO,FL 32803	59-3136203	501(C)(3)	6,229				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDSANCTUARY CAMPUS INC 350 S COUNTY ROAD 208 PALM BEACH, FL 33480	27-4077759	501(C)(3)	27,673				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KRISTI HOUSE 1265 NW 12TH AVENUE MIAMI, FL 33136	65-0576650	501(C)(3)	16,147				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE WORTH WEST RESIDENT PLANNING GROUP 4730 MAINE STREET LAKE WORTH, FL 33461	65-0838753	501(C)(3)	44,810				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAWRENCE E WILL MUSEUM A MUSEUM OF THE GLADES 530 SMAIN STREET BELLE GLADE, FL 33430	59-1690097	501(C)(3)	6,676				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEGAL AID SOCIETY OF PALM BEACH COUNTY INC 423 FERN ST STE 200 WEST PALM BEACH, FL 33401	59-6046994	501(C)(3)	190,567				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOCAL INDEPENDENT CHARITIES OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	94-3042430	501(C)(3)	26,550				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUIE BING ATHLETIC SCHOLARSHIP FUND INC 10500 SW 164TH STREET MIAMI,FL 33157	65-0745873	501(C)(3)	5,498				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MAASAI WILDERNESS CONSERVATION TRUST PO BOX 1413 SANTA BARBARA, CA 93102	66-0627488	501(C)(3)	15,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKING EVERY DAY COUNT INC 501 SOUTH FLAGLER DRIVE SUITE 503 WEST PALM BEACH, FL 33401	46-0923976	501(C)(3)	6,903				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MARTIN HABITAT FOR HUMANITY INC 2555 SE BONITA STREET STUART,FL 34997	59-2816698	501(C)(3)	10,211				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDICAL RESEARCH CHARITIES 125 WASHINGTON STREET SUITE 201 SALEM, MA 01970	94-3148591	501(C)(3)	26,049				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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MENTAL HEALTH ASSOCIATION OF PALM BEACH COUNTY INC 909 FERN ST WEST PALM BEACH, FL 33401	59-0760220	501(C)(3)	94,759				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MIAMI RESCUE MISSION 2159 NW 1ST COURT MIAMI, FL 33168	59-1743865	501(C)(3)	18,985				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MILAGRO CENTER 695 AUBURN AVE DELRAY BEACH, FL 33444	65-0804625	501(C)(3)	122,839				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MILITARY FAMILY AND VETERANS SERVICE ORGANIZATIONS OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR, CA 94925	94-3193418	501(C)(3)	94,375				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MILITARY SUPPORT GROUPS OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	27-2242752	501(C)(3)	26,122				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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MOTHERS AGAINST MURDERERS ASSOCIATION 2100 45TH STREET SUITE B5 WEST PALM BEACH, FL 33407	13-4257073	501(C)(3)	6,708				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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NAMI OF PALM BEACH COUNTY 1520 10TH AVE N STE D LAKE WORTH,FL 33460	59-2301320	501(C)(3)	18,015				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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NATIONAL BLACK UNITED FEDERATION OF CHARITIES INC 40 CLINTON STREET - 5TH FLOOR NEWARK, NJ 07102	52-1764913	501(C)(3)	7,739				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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NEW YORK UNIVERSITY LANGONE MEDICAL CENTER LANGONE MEDICAL CENTER 1 PARK AVE 17TH FLOOR NEW YORK, NY 10016	13-3971298	501(C)(3)	10,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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NONPROFITS FIRST 2300 HIGH RIDGE ROAD SUITE 132 BOYNTON BEACH, FL 33426	26-3189428	501(C)(3)	30,498				ALLOCATION GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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OSHO ACADEMY INC 120 DEER TRAIL DR SEDONA,AZ 86336	86-0760237	501(C)(3)	14,200				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PACE ACADEMY INC 966 WPACES FERRY RD NW ATLANTA,GA 30327	58-0706812	501(C)(3)	10,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PACE CENTER FOR GIRLS INC - JACKSONVILLE 1 WADAMS ST SUITE 301 JACKSONVILLE,FL 32202	59-2414492	501(C)(3)	62,000				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS

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

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PALM BEACH COUNTY FOOD BANK 525 GATOR DRIVE LANTANA, FL 33462	90-0788707	501(C)(3)	231,415				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PALM BEACH COUNTY LITERACY COALITION 3651 QUANTUM BLVD BOYNTON BEACH, FL 33426	65-0169781	501(C)(3)	112,589				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PALM BEACH COUNTY MEDICAL SOCIETY SERVICES INC 3540 FOREST HILL BLVD 101 WEST PALM BEACH, FL 33406	65-1048299	501(C)(3)	84,965				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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PALM BEACH DRAMAWORKS 201 CLEMATIS STREET WEST PALM BEACH, FL 33401	65-1040048	501(C)(3)	21,799				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PALM BEACH HABILITATION CENTER 4522 S CONGRESS AVE LAKE WORTH, FL 33461	59-6213381	501(C)(3)	128,272				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PALM BEACH OPERA 415 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401	59-1060864	501(C)(3)	61,051				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PALM BEACH SYMPHONY 44 COCOANUT ROW M207B PALM BEACH, FL 33480	59-1542539	501(C)(3)	56,646				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PARENT-CHILD CENTER INC 2001 W BLUE HERON BOULEVARD RIVIERA BEACH, FL 33404	59-1964034	501(C)(3)	15,044				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PATHWAYS TO PROSPERITY INC 233 NE 12TH AVENUE BOYNTON BEACH, FL 33435	27-3550271	501(C)(3)	6,229				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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PBC ANIMAL CARE AND CONTROL ANIMAL SERVICES PROGRAM 7100 BELVEDERE RD ROYAL PALM BEACH, FL 33411	59-6000785	501(C)(3)	5,960				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLACE OF HOPE INC 9078 ISAIAH LANE PALM BEACH GARDENS, FL 33418	65-0841384	501(C)(3)	26,207				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POSTAL EMPLOYEES' RELIEF FUND PO BOX 7630 WOODBRIGE,VA 22195	52-1666010	501(C)(3)	27,889				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREGNANCY CARE CENTER INC 1119 DELAWARE AVENUE FORT PIERCE, FL 34950	65-0468255	501(C)(3)	6,997				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIME TIME PALM BEACH COUNTY INC 2300 HIGH RIDGE ROAD SUITE 330 BOYNTON BEACH, FL 33426	65-1071628	501(C)(3)	16,001				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
QUANTUM HOUSE INC 901 45TH STREET WEST PALM BEACH, FL 33402	65-0898326	501(C)(3)	11,443				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REDEEM THE SHADOWS MINISTRIES INC 917 SE CENTRAL PARKWAY STUART, FL 34997	27-2128438	501(C)(3)	8,836				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESOURCE DEPOT 2510 FLORIDA AVE WEST PALM BEACH, FL 33401	65-0964759	501(C)(3)	5,448				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROGER VON AMELUNXEN FOUNDATION PO BOX 660159 FRESH MEADOWS, NY 11366	11-2583014	501(C)(3)	60,347				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUTH RALES JEWISH FAMILY SERVICE OF SOUTH PALM BEACH COUNTY 21300 RUTH BARON COLEMAN BLVD BOCA RATON, FL 33428	65-1115689	501(C)(3)	68,432				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY OF PALM BEACH COUNTY 2100 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	58-0660607	501(C)(3)	57,189				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAMARITAN HOUSE FOR BOYS INC 1490 SE COVE ROAD STUART,FL 34997	59-1373247	501(C)(3)	9,063				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL OF THE ARTS FOUNDATION INC PO BOX 552 WEST PALM BEACH, FL 33402	65-0395865	501(C)(3)	21,522				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEAGULL INDUSTRIES FOR THE DISABLED INC 3879 WINDUSTRIAL WAY RIVIERA BEACH, FL 33404	59-1879968	501(C)(3)	58,867				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARE THE STOKE FOUNDATION PO BOX 1105 LAKE WORTH, FL 33460	27-3206852	501(C)(3)	7,964				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SICKLE CELL FOUNDATION OF PALM BEACH COUNTY INC 1600 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407	59-1975315	501(C)(3)	12,007				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF THE FOUR ARTS 2 FOUR ARTS PLAZA PALM BEACH, FL 33480	59-0454318	501(C)(3)	27,914				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOL CHILDREN THEATRE INC 3333 N FEDERAL HIGHWAY BOCA RATON, FL 33431	46-2197258	501(C)(3)	25,852				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH FLORIDA SCIENCE MUSEUM 4801 DREHER TRAIL NORTH WEST PALM BEACH, FL 33405	59-0915177	501(C)(3)	38,619				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TABERNACLE MISSIONARY BAPTIST CHURCH 801 8TH STREET WEST PALM BEACH, FL 33401	23-7335436	501(C)(3)	15,904				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAKE STOCK IN CHILDREN 1896 PALM BEACH LAKES BLVD SUITE 103 WEST PALM BEACH, FL 33409	20-8077416	501(C)(3)	9,265				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARC OF MARTIN COUNTY 2001 SOUTH KANNER HWY STUART, FL 34994	59-6153484	501(C)(3)	23,529				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARC OF PALM BEACH COUNTY 1201 AUSTRALIAN AVE RIVIERA BEACH, FL 33404	59-0883386	501(C)(3)	595,403				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARC OF THE GLADES 4250 NW 16TH STREET BELLE GLADE, FL 33430	59-1760374	501(C)(3)	82,557				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARMORY ART CENTER INC 1700 PARKER AVE WEST PALM BEACH, FL 33401	59-2808612	501(C)(3)	5,222				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARTS COUNCIL INC 80 EAST OCEAN BOULEVARD STUART,FL 34994	59-2015691	501(C)(3)	16,608				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BOBBY RESCINITI HEALING HEARTS FOUNDATION 351 N CONGRESS AVE 281 BOYNTON BEACH, FL 33426	26-0146851	501(C)(3)	69,633				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CENTER TO PROMOTE HEALTHCARE ACCESS INC 1333 BROADWAY SUITE 605 OAKLAND,CA 94612	59-3831966	501(C)(3)	78,799				GRANTS TO SUPPORT PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CHILDREN'S PLACE AT HOME SAFE INC 2840 6TH AVE SOUTH LAKE WORTH,FL 33461	59-1935485	501(C)(3)	105,562				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COUNCIL ON AGING OF MARTIN COUNTY INC 900 SE SALERNO ROAD STUART,FL 34997	52-1007762	501(C)(3)	7,804				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GATHERING - PALM BEACH 717 PROSPERITY FARMS ROAD NORTH PALM BEACH, FL 33408	59-2810392	501(C)(3)	31,050				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GLADES INITIATIVE 141 SE AVE C BELLE GLADE, FL 33430	01-0733180	501(C)(3)	74,047				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LORD'S PLACE INC PO BOX 3265 WEST PALM BEACH,FL 33402	59-2240502	501(C)(3)	312,694				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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THE VOLEN CENTER 1515 W PALMETTO PARK RD BOCA RATON, FL 33486	59-2695062	501(C)(3)	122,479				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREASURE COAST HEALTH COUNCIL INC 600 SANDTREE DRIVE SUITE 101 PALM BEACH GARDENS, FL 33403	59-2242689	501(C)(3)	15,418				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED CEREBRAL PALSY OF BROWARD PB & MID COAST COUNTIES 3595 2ND AVE NORTH LAKE WORTH, FL 33461	65-0229776	501(C)(3)	232,815				GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED NEGRO COLLEGE FUND - (CFC) 1805 7TH STREET NW WASHINGTON,DC 20001	13-1624241	501(C)(3)	19,116				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED SERVICE ORGANIZATIONS INC 2111 WILSON BLVD SUITE 1200 ARLINGTON,VA 22201	13-1610451	501(C)(3)	8,116				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF BROWARD COUNTY ANSIN BUILDING 1300 S ANDREWS AVENUE FT LAUDERDALE, FL 33316	59-0624402	501(C)(3)	100,370				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF COLLIER COUNTY INC PROFESSIONAL ARTS BUILDING 848 FIRST AVENUE NORTH STE 240 NAPLES,FL 34102	59-1026096	501(C)(3)	9,519				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF FORSYTH COUNTY 301 NORTH MAIN STREET - STE 1700 WINSTON SALEM, NC 27101	23-7357234	501(C)(3)	96,249				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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UNITED WAY OF GREATER WATERBURY 100 N ELM ST 2ND FLOOR WATERBURY,CT 06702	06-0646634	501(C)(3)	5,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

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UNITED WAY OF INDIAN RIVER COUNTY INC P O BOX 1960 VERO BEACH,FL 32961	59-1087090	501(C)(3)	5,410				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

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UNITED WAY OF MARTIN COUNTY INC PO BOX 362 STUART, FL 34995	23-7273540	501(C)(3)	13,277				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF MIAMI-DADE INC 3250 SW 3RD AVENUE MIAMI,FL 33129	59-0830840	501(C)(3)	70,738				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF ST LUCIE COUNTY 4800 S US HIGHWAY 1 FORT PIERCE, FL 34982	59-6212157	501(C)(3)	5,709				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE FLORIDA KEYS 1400 UNITED STREET 110 KEY WEST, FL 33040	59-1288630	501(C)(3)	18,106				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN LEAGUE OF PALM BEACH COUNTY INC 1700 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407	59-1533710	501(C)(3)	9,503				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN YOUTH IMPACT 2823 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407	91-1901103	501(C)(3)	51,068				ALLOCATION AND GRANTS TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VILLAGE ACADEMY ELEMENTARY SCHOOL 400 SW 12 AVENUE DELRAY BEACH,FL 33444	65-1060527	501(C)(3)	100,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VILLAGE BAPTIST CHURCH 3600 VILLAGE BOULEVARD WEST PALM BEACH, FL 33407	59-0766989	501(C)(3)	90,000				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEISS SCHOOL 4176 BURNS ROAD PALM BEACH GARDENS, FL 33410	27-0160216	501(C)(3)	38,325				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILD ANIMALS WORLDWIDE PO BOX 45754 SAN FRANCISCO ,CA 94145	20-8774272	501(C)(3)	8,030				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN CHILDREN AND FAMILY SERVICE CHARITIES OF AMERICA 1100 LARKSPUR LANDING CIRCLE SUITE 340 LARKSPUR,CA 94925	94-3193386	501(C)(3)	14,911				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WXEL PO BOX 6607 WEST PALM BEACH,FL 33405	27-4811899	501(C)(3)	14,480				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YASHAR LACHAYAL 7999 FEDERAL HIGHWAY BOCA RATON, FL 33487	20-8021512	501(C)(3)	7,500				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF SOUTH PALM BEACH INC (BOCA RATON) 6631 SOUTH PALMETTO CIRCLE SOUTH BOCA RATON, FL 33433	59-1416281	501(C)(3)	6,137				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF THE PALM BEACHES INC 2085 S CONGRESS AVE WEST PALM BEACH, FL 33406	59-0624470	501(C)(3)	8,593				DONOR DESIGNATIONS FOR GENERAL SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG SINGERS OF THE PALM BEACHES 701 OKEECHOBEE BOULEVARD WEST PALM BEACH, FL 33401	30-0193514	501(C)(3)	11,727				DONOR DESIGNATIONS FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA OF PALM BEACH COUNTY FLORIDA INC 1016 N DIXIE HIGHWAY WEST PALM BEACH, FL 33401	59-0751935	501(C)(3)	53,057				ALLOCATION TO SUPPORT PROGRAM OPERATING COSTS, DONOR DESIGNATIONS FOR GENERAL SUPPORT

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
UNITED WAY OF PALM BEACH COUNTY INC

Employer identification number  
59-0683258

Part I

Questions Regarding Compensation

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

**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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII  
**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)CHUCK ANDERSON CEO (THROUGH 6/10/13)	(i) (ii)	179,695 0	0 0	4,277 0	8,509 0	12,592 0	205,073 0	0 0

**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.

Return Reference	Explanation
Schedule J, Part I, Line 4a, Severance or change-of-control payment	CHUCK ANDERSON - \$73,333 PAID OUT OVER 16 WEEKS IN EQUIVALENT INCREMENTS

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

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

►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
UNITED WAY OF PALM BEACH COUNTY INC

Employer identification number  
59-0683258

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	5	87,946	MARKET VALUE
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 ► ( )				
26 Other ►( )				
27 Other ►( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .	29	0		
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a	Yes	No	No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	No	No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	32a	Yes	No	No
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Schedule M, Part I, Explanations of reporting method for number of contributions	SECURITIES - PUBLICLY TRADED THE ORGANIZATION IS RECORDING THE NUMBER OF CONTRIBUTIONS
Schedule M, part I, column (b), Line 9, Number of contributions or items contributed	THE ORGANIZATION IS RECORDING THE NUMBER OF CONTRIBUTIONS

2013

Open to Public Inspection

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization UNITED WAY OF PALM BEACH COUNTY INC	Employer identification number 59-0683258
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, ORGANIZATION'S MISSION CONTINUED	
Form 990, Part VI, Sec A, Line 1a, Material differences in voting rights	ONLY THE BOARD MEMBER REPRESENTING FUNDED AGENCIES CANNOT VOTE
Form 990, Part VI, Sec B, Line 11b, Review of form 990 by governing body	A DRAFT OF FORM 990 IS REVIEWED BY THE SENIOR VICE PRESIDENT OF FINANCE AND OPERATIONS THE DRAFT FORM 990 IS THEN PRESENTED TO THE AUDIT COMMITTEE FOR REVIEW AND APPROVAL CONCURRENTLY, THE FINANCE COMMITTEE REVIEWS THE DRAFT FORM 990 AND MAY MAKE ADDITIONAL RECOMMENDATIONS A FINAL VERSION OF FORM 990 IS PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL
Form 990, Part VI, Sec B, Line 12c, Conflict of interest policy	BOARD MEMBERS AND STAFF COMPLETE AND SIGN CONFLICT OF INTEREST STATEMENTS ANNUALLY WHICH ARE REVIEWED BY THE CHIEF OPERATING OFFICER OF THE ORGANIZATION THE STAFF NOTIFIES MANAGEMENT OF ANY POSSIBLE CONFLICT THAT ARISES BOARD MEMBERS WITH A CONFLICT WILL ABSTAIN FROM ANY VOTE PERTAINING TO THEIR CONFLICT
Form 990, Part VI, Sec B, Line 15a, Process to establish compensation of top management official	EXECUTIVE COMPENSATION IS ESTABLISHED BY THE COMPENSATION COMMITTEE FACTORS SUCH AS NEIGHBORING UNITED WAY CEO SALARIES ARE TAKEN INTO CONSIDERATION AS WELL AS UNITED WAY SURVEYS AND HUMAN CAPITAL STUDIES THE COMPENSATION COMMITTEE FOR 2013-14 CONSISTED OF THE BOARD CHAIR, INCOMING CHAIR, AND IMMEDIATE PAST CHAIR COMPENSATION IS THEN APPROVED BY THE BOARD
Form 990, Part VI, Sec C, Line 19, Required documents available to the public	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST IN THE ORGANIZATION'S OFFICE THE ORGANIZATION'S CURRENT FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE THE ORGANIZATION'S CURRENT FORM 990 IS AVAILABLE ON ITS WEBSITE AS WELL AS THIRD PARTY WEBSITES