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Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public  
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047  
2018  
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

C Name of organization  
UNITED WAY OF MASSACHUSETTS BAY INC  
Doing business as  
UNITED WAY OF MASSACHUSETTS BAY AND MERRIMACK VALLEY  
Number and street (or P O box if mail is not delivered to street address) Room/suite  
51 SLEEPER STREET  
City or town, state or province, country, and ZIP or foreign postal code  
BOSTON, MA 02210  
F Name and address of principal officer  
Richard Voccio  
51 SLEEPER STREET  
BOSTON, MA 02210

D Employer identification number  
04-2382233  
E Telephone number  
(617) 624-8000  
G Gross receipts \$ 62,974,304

I Tax-exempt status  
☒ 501(c)(3) ☐ 501(c) ( ) (insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: WWW SUPPORTUNITEDWAY ORG

H(a) Is this a group return for subordinates? ☐ Yes ☒ No  
H(b) Are all subordinates included? ☐ Yes ☐ No  
If "No," attach a list (see instructions)  
H(c) Group exemption number

K Form of organization  
☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1965  
M State of legal domicile  
MA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities  
We unite to create positive, lasting change for people in need We call it harnessing the power of people working together And that means everyone - individuals, nonprofits, companies, and government agencies We work every day to achieve our vision and mission by focusing on two foundations of better lives Financial Opportunity and Educational Success Specifically Financial Opportunity Ensuring that all families have safe housing, healthy food, and quality childcare, that they have jobs that allow them to support themselves and their families, and that they have access to financial tools and coaching to help build a better future Educational Success Preparing children so they can enter school ready to learn, develop critical social and academic skills, and get the support they need to stay in school and graduate

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 41

4 Number of independent voting members of the governing body (Part VI, line 1b) 40

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 157

6 Total number of volunteers (estimate if necessary) 9,156

7a Total unrelated business revenue from Part VIII, column (C), line 12 0

7b Net unrelated business taxable income from Form 990-T, line 34 0

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

42,219,697

207,702

4,304,698

1,303,433

48,035,530

Current Year

39,921,717

233,874

388,417

1,746,805

42,290,813

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

16b Total fundraising expenses (Part IX, column (D), line 25) 5,525,931

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

33,841,493

0

8,823,494

0

4,858,427

47,523,414

512,116

30,637,566

0

9,233,519

0

4,459,205

44,330,290

-2,039,477

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

57,598,671

5,893,928

51,704,743

End of Year

61,640,438

8,187,298

53,453,140

Part II Signature Block

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

Sign Here

Signature of officer

Richard Voccio CHIEF ADMINISTRATIVE OFFICER

2020-02-13

Date

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

We unite to create positive, lasting change for people in need. We call it harnessing the power of people working together. And that means everyone - individuals, nonprofits, companies, and government agencies. We work every day to achieve our vision and mission by focusing on two foundations of better lives: Financial Opportunity and Educational Success. Specifically: Financial Opportunity: Ensuring that all families have safe housing, healthy food, and quality childcare, that they have jobs that allow them to support themselves and their families, and that they have access to financial tools and coaching to help build a better future. Educational Success: Preparing children so they can enter school ready to learn, develop critical social and academic skills, and get the support they need to stay in school and graduate.

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

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ 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.

<b>4a</b>	(Code ) (Expenses \$ 13,681,362 including grants of \$ 11,617,407 ) (Revenue \$ )
	See Additional Data

<b>4b</b>	(Code ) (Expenses \$ 7,018,226 including grants of \$ 5,523,264 ) (Revenue \$ )
	See Additional Data

<b>4c</b>	(Code ) (Expenses \$ 4,736,470 including grants of \$ 3,241,508 ) (Revenue \$ )
	See Additional Data

See Additional Data Table

<b>4d</b>	Other program services (Describe in Schedule O )
	(Expenses \$ 10,897,501 including grants of \$ 10,255,387 ) (Revenue \$ 233,874 )

<b>4e</b>	<b>Total program service expenses</b> ▶	36,333,559
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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>1</b> Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>2</b> Yes	
<b>3</b> 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	<b>3</b>	No
<b>4 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	<b>4</b> Yes	
<b>5</b> 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	<b>5</b>	
<b>6</b> 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	<b>6</b>	No
<b>7</b> 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	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<b>8</b>	No
<b>9</b> 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	<b>9</b>	No
<b>10</b> 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	<b>10</b> Yes	
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>11a</b> Yes	
<b>b</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	<b>11b</b> Yes	
<b>c</b> 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	<b>11c</b>	No
<b>d</b> 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	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>11e</b> Yes	
<b>f</b> 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	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<b>12a</b> Yes	
<b>b</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	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	No
<b>b</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	<b>14b</b>	No
<b>15</b> 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	<b>15</b>	No
<b>16</b> 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	<b>16</b>	No
<b>17</b> 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)	<b>17</b>	No
<b>18</b> 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	<b>18</b> Yes	
<b>19</b> 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	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b> Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>	No

**Part IV Checklist of Required Schedules (continued)**

		Yes	No	
<b>23</b>	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	
<b>24a</b>	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>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
<b>c</b>	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		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) 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>b</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
<b>26</b>	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
<b>27</b>	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
<b>28</b>	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)			
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
<b>b</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
<b>c</b>	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	Yes	
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
<b>30</b>	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
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
<b>32</b>	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
<b>33</b>	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
<b>34</b>	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
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
<b>b</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		
<b>36</b>	<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
<b>37</b>	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
<b>38</b>	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 ☐

		Yes	No	
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	72	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes	

<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .		<b>2a</b>	157			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . .				<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . .				<b>3b</b>		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .				<b>4a</b>		No
<b>b</b> If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .				<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .				<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . .				<b>6a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .				<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>						
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .				<b>7a</b>	Yes	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .				<b>7b</b>	Yes	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .				<b>7c</b>	Yes	
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .				<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				<b>7e</b>		No
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .				<b>7f</b>		No
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .				<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .				<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .						
				<b>8</b>		
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . .				<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . .				<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter						
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .				<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter						
<b>a</b> Gross income from members or shareholders . . . . .				<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .				<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?						
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>						
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O				<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .				<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand . . . . .				<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .				<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . .				<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .						
				<b>15</b>		No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .						
				<b>16</b>		No

**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
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b> 41		
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>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b> 40		
<b>2</b> 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?	<b>2</b>		No
<b>3</b> 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?	<b>3</b>		No
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		No
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		No
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		No
<b>7a</b> 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?	<b>7a</b>		No
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		No
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
<b>a</b> The governing body?	<b>8a</b>	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	Yes	
<b>9</b> 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	<b>9</b>		No

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	No
<b>b</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?	<b>10b</b>	
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b> Yes	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b> Yes	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b> Yes	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b> Yes	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b> Yes	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b> Yes	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b> Yes	
<b>b</b> Other officers or key employees of the organization	<b>15b</b> Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</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?	<b>16b</b>	

## Section C. Disclosure

**17** List the States with which a copy of this Form 990 is required to be filed: MA , NH

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-A 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 ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
 ► Richard Voccio 51 SLEEPER STREET BOSTON, MA 02210 (617) 624-8000

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

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

1

● 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      Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

[illegible]

<b>1b Sub-Total</b>			
<b>c Total from continuation sheets to Part VII, Section A</b>			
<b>d Total (add lines 1b and 1c)</b>	2,044,864	0	422,587

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 ▶ 15

		Yes	No
3	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> . . . . .	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4	Yes
5	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> . . . . .	5	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
TCAM Core Property Fund  PO Box 360060 Pittsburgh, PA 15251	Building Property Manager	1,435,677
DigitalNet Technology Solutions LLC  300 Brickstone Square Suite 201 Andover, MA 01810	IT Services	673,236
RSM US LLP  331 W 3rd Street - Suite 200 Davenport, IA 52801	Audit	360,013
Technology Business Solutions LLC  3000 Atrium Way - St 117 Mount Laurel, NJ 08054	IT Services	356,933
Commisso Law PC  185 Devonshire Street - 3rd Floor Boston, MA 02110	Legal	229,620

<p><b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 10</p>	
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Part VIII		Statement of Revenue					
Check if Schedule O contains a response or note to any line in this Part VIII							
			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	45,769			
	b	Membership dues	1b				
	c	Fundraising events	1c	3,799,961			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	1,653,422			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	34,422,565			
	g	Noncash contributions included in lines 1a - 1f \$		758,778			
	h	Total. Add lines 1a-1f		39,921,717			
Program Service Revenue			Business Code				
	2a	Service Fee Revenue		233,874	233,874		
	b						
	c						
	d						
	e						
	f	All other program service revenue		0	0	0	
	g	Total. Add lines 2a-2f		233,874			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		426,767		426,767	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	(i) Real		(ii) Personal			
		Gross rents					
		b Less rental expenses					
		c Rental income or (loss)	0	0			
	d	Net rental income or (loss)					
	7a	(i) Securities		(ii) Other			
		Gross amount from sales of assets other than inventory	18,706,234	823,726			
		b Less cost or other basis and sales expenses	19,014,275	554,035			
		c Gain or (loss)	-308,041	269,691			
	d	Net gain or (loss)		-38,350		-38,350	
	8a	Gross income from fundraising events (not including \$ 3,799,961 of contributions reported on line 1c) See Part IV, line 18		a	1,115,181		
		b Less direct expenses		b	1,115,181		
		c	Net income or (loss) from fundraising events				
	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				
	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					
Miscellaneous Revenue		Business Code					
11a	Income from Outside Trusts	900099	1,746,805			1,746,805	
b							
c							
d	All other revenue		0	0	0	0	
e	Total. Add lines 11a-11d		1,746,805				
12	Total revenue. See Instructions		42,290,813	233,874	0	2,135,222	

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	30,637,566	30,637,566		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
<b>4</b> Benefits paid to or for members.				
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	1,713,755	892,023	224,366	597,366
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
<b>7</b> Other salaries and wages.	5,799,281	2,316,185	1,117,282	2,365,814
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	394,796	150,382	68,345	176,069
<b>9</b> Other employee benefits.	787,072	304,187	155,990	326,895
<b>10</b> Payroll taxes.	538,615	230,042	89,017	219,556
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.				
<b>b</b> Legal.	-71,964	-21,057	-30,974	-19,933
<b>c</b> Accounting.	8,858	2,914	3,726	2,218
<b>d</b> Lobbying.				
<b>e</b> Professional fundraising services. See Part IV, line 17.				
<b>f</b> Investment management fees.				
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	0	0	0	0
<b>12</b> Advertising and promotion.				
<b>13</b> Office expenses.	429,089	105,367	102,575	221,147
<b>14</b> Information technology.	1,224,814	533,575	198,525	492,714
<b>15</b> Royalties.				
<b>16</b> Occupancy.	1,090,897	452,362	181,082	457,453
<b>17</b> Travel.	112,069	55,765	6,851	49,453
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.	18,614	8,220	3,670	6,724
<b>20</b> Interest.				
<b>21</b> Payments to affiliates.	400,927	134,019	124,703	142,205
<b>22</b> Depreciation, depletion, and amortization.	454,590	191,828	73,754	189,008
<b>23</b> Insurance.	57,746	24,197	9,403	24,146
<b>24</b> 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):				
<b>a</b> Contracted Services.	340,857	148,490	55,248	137,119
<b>b</b> Printing & Publications.	171,318	80,059	20,339	70,920
<b>c</b> Bank and Credit Card Fees.	123,463	40,623	51,922	30,918
<b>d</b> Recruiting & Training.	71,269	35,980	10,806	24,483
<b>e</b> All other expenses.	26,658	10,832	4,170	11,656
<b>25</b> Total functional expenses. Add lines 1 through 24e.	44,330,290	36,333,559	2,470,800	5,525,931
<b>26</b> 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).				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	3,653,757	<b>1</b>	3,394,714
	<b>2</b> Savings and temporary cash investments . . . . .	13,572	<b>2</b>	13,541
	<b>3</b> Pledges and grants receivable, net . . . . .	8,714,803	<b>3</b>	10,426,455
	<b>4</b> Accounts receivable, net . . . . .	39,429	<b>4</b>	8,404
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> 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 . . . . .		<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	393,813	<b>9</b>	472,959
	<b>10a</b> Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 6,796,982		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 6,134,143		
	<b>11</b> Investments—publicly traded securities . . . . .	1,098,708	<b>10c</b> 662,839	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	29,217,299	<b>11</b>	29,384,045
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	13,436,737	<b>12</b>	16,262,203
	<b>14</b> Intangible assets . . . . .	1,000,000	<b>13</b>	1,000,000
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	30,553	<b>15</b>	15,278	
	57,598,671	<b>16</b>	61,640,438	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	2,431,182	<b>17</b>	2,752,402
	<b>18</b> Grants payable . . . . .	297,994	<b>18</b>	1,062,637
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> 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 . . . . .		<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	3,164,752	<b>25</b>	4,372,259
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	5,893,928	<b>26</b>	8,187,298
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	26,405,745	<b>27</b>	28,311,716
	<b>28</b> Temporarily restricted net assets . . . . .	13,327,785	<b>28</b>	13,028,810
	<b>29</b> Permanently restricted net assets . . . . .	11,971,213	<b>29</b>	12,112,614
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	51,704,743	<b>33</b>	53,453,140
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	57,598,671	<b>34</b>	61,640,438

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	42,290,813
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	44,330,290
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	-2,039,477
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	51,704,743
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	1,844,687
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	1,943,187
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	53,453,140

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> 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		
<b>2a</b> 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		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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	Yes	
<b>3a</b> 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?	Yes	
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

# Additional Data

**Software ID:** 18007697  
**Software Version:** 2018v3.1  
**EIN:** 04-2382233  
**Name:** UNITED WAY OF MASSACHUSETTS BAY INC

Form 990 (2018)

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

FINANCIAL OPPORTUNITIES ENDING HOMELESSNESS - At United Way, we believe all individuals and families should have safe, stable homes and the resources to keep them long term. On any given night in Massachusetts, more than 3,700 families are experiencing homelessness. That's more than 13,000 individuals, 60% of whom are children. The effects of homelessness are devastating for families. Children without homes are twice as likely to repeat a grade, four times as likely to develop asthma and other health issues, and are at a 52% higher risk for developmental delays. For parents, jobs can be hard to come by and harder to keep, putting the dream of security further out of reach. It doesn't have to be that way. OUR SOLUTION - Rising housing costs, mental health issues, substance misuse, and a host of other factors contribute to the increasing homelessness rate in our community. Our solution brings together nonprofits that address each of these issues as part of the complex whole. We fund programs that are working effectively, and we create and pilot new solutions where we see gaps. Our goals are: 1 - Stabilizing families in safe, affordable housing and providing long-term support so they can weather future emergencies. 2 - Investing in and piloting innovative new programs that can be rolled out state-wide. 3 - Scaling school-community partnerships that prevent homelessness, reduce disruptive school moves, help families develop financial well-being, and help vulnerable students attend school regularly. How We're Doing So Far: 1 - \$2.1M annual investment in Ending Homelessness. 2 - 10,410 Families in crisis avoided homelessness. 3 - 20% Reduction in chronic homelessness since 2016. MOVING FAMILIES OUT OF POVERTY - At United Way, we believe every family deserves a pathway out of poverty. Too many people in our region know what it's like to be unemployed or work multiple jobs and still struggle to make ends meet. Too many of our neighbors have to decide between filling the fridge or filling a prescription. And too many people can't find a job that pays well enough to face these challenges head on. For these families, a single setback is enough to be financially devastating. OUR SOLUTION - There are few choices available to families on the edge of financial catastrophe. They could fall prey to predatory financial advice or services, and if they default on the loan, their credit suffers. Without good credit, their options thin even further. Just "finding a better job" isn't always the answer either. Without specific skills and training, people settle for low-paying jobs, leaving their savings to dry up before the month is out. Climbing out of poverty is complex. United Way is providing leadership to a network of nonprofits who serve families across our region. Together, we are creating solutions that work. We help families in need set reachable goals such as cleaning up their credit so they can rent a home, sending a child to college, or getting a job that will pay a living wage. We help families by: 1 - Investing in organizations that focus on job skills training that offers a defined career pathway driven by employer needs. 2 - Scaling an integrated services model with financial coaching, career placement, public benefit screening services, all under one roof. 3 - Expanding access to financial coaching that helps families build credit, increase their savings, reduce debt and build assets. How We're Doing So Far: 1 - \$2.8M annual investment in Moving Families Out of Poverty. 2 - 3,147 Individuals placed in jobs. 3 - \$3,141 Average increase in annual savings for families receiving financial coaching.

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

EDUCATION SUCCESS PREPARING YOUTH FOR SUCCESS - At United Way, we believe that all young people should graduate from high school prepared to succeed in work and life. Low-income youth in Massachusetts consistently score 25-30 points lower on reading and math assessments than those in higher income brackets. These gaps in academic performance and personal skill-building can be the start of a trajectory of lifelong challenges, leading to fewer economic opportunities and lower lifetime earnings than their wealthier peers. Despite one of the highest academic rankings in the nation, Massachusetts falls short when it comes to children from low-income neighborhoods. In addition to the academic achievement gaps, many under-funded schools lack the resources to focus on building social and emotional skills such as teamwork, problem solving, empathy, grit, and self-control. Competence in these areas has been linked to higher academic performance, more positive self-image, and fewer behavioral and substance abuse issues down the road.

OUR SOLUTION - We're working to help the more than 73,000 youth in Massachusetts, ages 16-24, who do not consistently attend school or work and are at greater risk of long-term poverty, incarceration, and substance misuse. We're offering practice with the emotional and social skills they'll need to succeed, as well as building their credentials and experience for the world after high school. Through out-of-school programs, 41,000 K-12 students will work toward social and emotional readiness, and 3,600 off-track kids will find a path toward college and a rewarding career. These efforts are all geared toward creating a higher skilled workforce that can sustain a thriving economy. We want to ensure that kids who face significant economic barriers can play a vital part in the workforce and their community, so we're preparing youth for success by:

- 1 - Pairing social and emotional skill-building with meaningful, hands-on learning experiences
- 2 - Expanding access to high quality programs that focus on putting disconnected youth on a pathway to advancing their education and/or career
- 3 - Supporting out-of-school time programs that focus on social and emotional skills like communication, teamwork, critical thinking, problem solving and grit

How We're Doing So Far:

- 1 - \$6.1M Annual Investment in Preparing Youth for Success
- 2 - 17,041 Youth participated in academic achievement or college readiness programs last year
- 3 - 3,621 Young people were mentored through our programs

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

EDUCATION SUCCESS SUPPORTING YOUNG CHILDREN - At United Way, we believe that all children should enter school on a path to succeed, and that to do this, we must move the entire family forward together. A child's first five years of life are the most critical time for brain development, but 33 percent of Massachusetts children enter kindergarten unprepared to learn. All children have the potential to succeed in school and in life, but not all children have the same opportunities to realize that potential. Many children lack important support that prepares them for school and academic success. Without it, these children can quickly fall behind and often never catch up. Unless they can read at grade level by third grade, they're four times less likely to graduate from high school.

OUR SOLUTION - In low-income neighborhoods, the youngest children are most vulnerable. The stresses of poverty during these critical years do tremendous harm to a growing brain. And children whose parents are unable to engage in their development can lag as much as 6 months behind in vocabulary development by age 2. Our solution involves the whole family, allowing parents to work and their young children to grow and thrive, supporting them by:

- 1 - Expanding access to high-quality early education and care programs that promote early literacy and social skills.
- 2 - Giving parents and caregivers the resources to engage with children and support healthy development, as well as the tools to screen for developmental delays if needed.
- 3 - Scaling a 2-Generational, whole family model that enables parents to work and children to thrive.

How We're Doing So Far:

- 1 - \$2.8M Annual Investment in Supporting Young Children.
- 2 - 10,080 Children enrolled in early education and care programs in 2017.
- 3 - 2,458 Families received home visiting services.

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

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 8,649,075 including grants of \$ 8,649,075 ) (Revenue \$ 233,874 )

DONORS TO THE CAMPAIGN MAY DESIGNATE ALL OR PART OF THEIR CONTRIBUTIONS TO SPECIFIC AGENCIES SUCH AMOUNTS ARE NOT INCLUDED AS ALLOCATIONS TO AGENCIES AND ARE RECORDED AS A DEDUCTION FROM DONOR CONTRIBUTIONS IN THE AUDITED FINANCIAL STATEMENT OF ACTIVITIES ALL DONOR DESIGNATIONS ARE VERIFIED FOR 501(C)(3) ELIGIBILITY AND COMPLIANCE WITH THE USA PATRIOT ACT

(Code ) (Expenses \$ 2,248,426 including grants of \$ 1,606,312 ) (Revenue \$ )

PROGRAM ADMINISTRATION INCLUDES UWMB'S INTERNAL RESOURCE ALLOCATION TO SUPPORT CHILDREN, YOUTH AND FAMILY PROGRAMS





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			
Phyllis Barajas Director	2 0 .....	X						0	0	0
Robert L Beal Director	2 0 .....	X						0	0	0
Jeffrey Bray Director	2 0 .....	X						0	0	0
Ivy L Brown Director	2 0 .....	X						0	0	0
Jacques Carter Director	2 0 .....	X						0	0	0
Elizabeth Cheng Director	2 0 .....	X						0	0	0
Timothy J Connelly Director	2 0 .....	X						0	0	0
Janet Cooper Director	2 0 .....	X						0	0	0
Kristina Davis Director	2 0 .....	X						0	0	0
William T Eaton Director	2 0 .....	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			
John Mang Director	20 .....	X						0	0	0
Penni McLean-Conner Director	20 .....	X						0	0	0
Michael E Mooney Director	20 .....	X						0	0	0
Carolyn Murphy Director	20 .....	X						0	0	0
George Neble Director	20 .....	X						0	0	0
Eric Rosengren Director	20 .....	X						0	0	0
Jay A Shuman Director	20 .....	X						0	0	0
Jane Steinmetz Director	20 .....	X						0	0	0
Nick Toumpas Director	20 .....	X						0	0	0
Carol Valianti Director	20 .....	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			
Mark Whitney Director	2 0 .....	X						0	0	0
Sujata Yadav Director	2 0 .....	X						0	0	0
Richard Voccio Chief Administrative Officer, Assistant Board Treasurer	40 0 .....			X				201,010	0	43,525
Patricia Latimore Chief Operations Officer	40 0 .....				X			229,303	0	41,952
Lisa Rowan-Gillis Chief Development Officer	40 0 .....				X			258,455	0	43,908
Karley Ausiello SVP Community Impact	40 0 .....				X			155,379	0	39,039
Mark Lamothe SVP Marketing	40 0 .....				X			178,555	0	33,597
Jane Grady VP Human Resources & Ethics	40 0 .....					X		139,115	0	23,577
Joseph Sousa VP Corporate Relations	40 0 .....					X		135,948	0	36,959
Brigid Boyd VP Communications/Public Relations	40 0 .....					X		138,718	0	36,487

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			
Connie French VP Digital Marketing	40 0 .....					X		109,697	0	29,624
Janet Collins VP Individual Giving	40 0 .....					X		125,010	0	35,786

<b>SCHEDULE A</b> (Form 990 or 990-EZ)	<b>Public Charity Status and Public Support</b> Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.	OMB No 1545-0047
		<b>2018</b>
		<b>Open to Public Inspection</b>
Department of the Treasury Internal Revenue Service	<b>Name of the organization</b> UNITED WAY OF MASSACHUSETTS BAY INC	<b>Employer identification number</b> 04-2382233

**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 12, check only one box )

- ☐ **1** A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- ☐ **2** A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ) )
- ☐ **3** A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- ☐ **4** A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
- ☐ **5** An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )
- ☐ **6** A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- ☒ **7** An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- ☐ **8** A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- ☐ **9** An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- ☐ **10** An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- ☐ **11** An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- ☐ **12** An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - ☐ **a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - ☐ **b Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - ☐ **c Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - ☐ **d Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - ☐ **e** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
  - ☐ **f** Enter the number of supported organizations
- ☐ **g** Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	44,747,335	45,686,045	40,238,674	42,219,697	39,921,718	212,813,469
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	<b>Total.</b> Add lines 1 through 3	44,747,335	45,686,045	40,238,674	42,219,697	39,921,718	212,813,469
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)						0
6	<b>Public support.</b> Subtract line 5 from line 4						212,813,469

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	44,747,335	45,686,045	40,238,674	42,219,697	39,921,718	212,813,469
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	976,463	1,047,771	965,893	749,098	426,767	4,165,992
9	Net income from unrelated business activities, whether or not the business is regularly carried on		0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )	2,075,884	2,096,796	2,391,251	2,327,638	2,861,986	11,753,555
11	Total support. Add lines 7 through 10						228,733,016
12	Gross receipts from related activities, etc (see instructions)					12	0
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . . ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 93.04 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 91.35 %
16a	<b>33 1/3% support test—2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>	
b	<b>33 1/3% support test—2017.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
17a	<b>10%-facts-and-circumstances test—2018.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
b	<b>10%-facts-and-circumstances test—2017.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2018.** 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—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

Part IV

Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

<b>Part V</b> <b>Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations</b>			
<div><div>1</div><div><input type="checkbox"/></div><div>Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). <b>See instructions.</b> All other Type III non-functionally integrated supporting organizations must complete Sections A through E.</div></div>			
<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<div><div><input type="checkbox"/></div><div>Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).</div></div>		

Part V

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013. . . . .			
b From 2014. . . . .			
c From 2015. . . . .			
d From 2016. . . . .			
e From 2017. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014. . . . .			
b Excess from 2015. . . . .			
c Excess from 2016. . . . .			
d Excess from 2017. . . . .			
e Excess from 2018. . . . .			

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

<b>Facts And Circumstances Test</b>

**990 Schedule A, Supplemental Information**

Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	Other Income

# 990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - PROGRAM SERVICE REVENUE (FORM 990, PART I, SUMMARY, LINE 9) UNREALIZED GAINS AND LOSSES AND OTHER REVENUE (FORM 990, PART I, SUMMARY, LINE 11), COLUMN A - 2075884 0, COLUMN B - 2096796 0, COLUMN C - 2391251 0, COLUMN D - 2327638 0, COLUMN E - 2861986 0, COLUMN F - 11753555 0, DESCRIPTION - FUNDRAISING REVENUE, COLUMN A - , COLUMN B - , COLUMN C - , COLUMN D - , COLUMN E - , COLUMN F - 0,

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

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

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

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

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

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

Name of the organization UNITED WAY OF MASSACHUSETTS BAY INC	Employer identification number 04-2382233
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$
3	Volunteer hours for political campaign activities (see instructions)	

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				



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

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

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

**Limits on Lobbying Expenditures**  
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing  
organization's  
totals**(b)** Affiliated  
group totals

**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)

**b** Total lobbying expenditures to influence a legislative body (direct lobbying)

**c** Total lobbying expenditures (add lines 1a and 1b)

**d** Other exempt purpose expenditures

**e** Total exempt purpose expenditures (add lines 1c and 1d)

**f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

**g** Grassroots nontaxable amount (enter 25% of line 1f)

**h** Subtract line 1g from line 1a If zero or less, enter -0-

**i** Subtract line 1f from line 1c If zero or less, enter -0-

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

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

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b>	Volunteers?	Yes		
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
<b>c</b>	Media advertisements?		No	
<b>d</b>	Mailings to members, legislators, or the public?		No	
<b>e</b>	Publications, or published or broadcast statements?		No	
<b>f</b>	Grants to other organizations for lobbying purposes?		No	
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		7,887
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
<b>i</b>	Other activities?	Yes		2,640
<b>j</b>	Total. Add lines 1c through 1i			10,527
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

**Part IV Supplemental Information**

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

Return Reference	Explanation
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	UWMB DEVOTES A LIMITED AMOUNT OF TIME AND RESOURCES INTO ADVOCATING AROUND ISSUES THAT AFFECT LOW-INCOME CHILDREN, YOUTH AND FAMILIES. BY CONVENING KEY STAKEHOLDERS FROM THE BUSINESS COMMUNITY, LABOR, PHILANTHROPIC, PROVIDER AND FAITH COMMUNITIES, UWMB EDUCATES STATE POLICY MAKERS ABOUT EMERGING CONCERNS AND POTENTIAL SOLUTIONS. THIS ADVOCACY SEEKS SYSTEMATIC CHANGES AT THE STATE LEVEL ADDRESSING ROOT CAUSES. LOBBYING ACTIVITIES INCLUDE MEETINGS AND CORRESPONDENCE WITH POLICY MAKERS, TESTIFYING BEFORE LEGISLATIVE COMMITTEES, USING THE MEDIA VIA EDITORIALS AND OP-EDS TO DRIVE PUBLIC WILL, AND CONDUCTING RESEARCH TO MAKE ITS CASE. IN ADDITION, UWMB WORKS WITH STATE-LEVEL OFFICIALS ON SPECIFIC ISSUES RELATED TO EARLY EDUCATION QUALITY AND ACCESS, REDUCING INDIVIDUAL AND FAMILY HOMELESSNESS, AND ECONOMIC DEVELOPMENT.

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SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

UNITED WAY OF MASSACHUSETTS BAY INC

Employer identification number

04-2382233

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

Conservation Easements.

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

1

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of 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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

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

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

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

☐ Yes ☐ No

9

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

Part III

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

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

1a

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

b

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

(i)

Revenue included on Form 990, Part VIII, line 1

► \$

(ii)

Assets included in Form 990, Part X

► \$

2

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

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2018

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	16,230,422	16,021,428	15,091,507	15,606,619	16,034,415
b Contributions	0	0	0	429,536	0
c Net investment earnings, gains, and losses	757,111	941,313	1,664,423	-200,323	294,265
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	743,890	732,319	734,502	744,325	722,061
f Administrative expenses	0	0	0	0	0
g End of year balance	16,243,643	16,230,422	16,021,428	15,091,507	15,606,619

2

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

a

Board designated or quasi-endowment

29 %

b

Permanent endowment

37 %

c

Temporarily restricted endowment

34 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

(ii) related organizations

3a(i)

Yes

No

3a(ii)

No

3b

b

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

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		3,481,973	3,200,990	280,983
d Equipment		1,452,965	1,426,343	26,622
e Other		1,862,044	1,506,810	355,234
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				662,839

Part VII

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .	3,551,351	
(3) Other _____ (A) Alternative Investments	6,566,238	
(B) Investment in Partnership		
(C) Perpetual Trusts	6,144,614	
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	16,262,203	

Part VIII

Investments—Program Related.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX

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

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

Part X

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
Loss on Sub Lease		
Deferred Lease Incentive	13,324	
Donor Designtn next year Campaign		
Donor Designtn current Campaign	4,273,692	
Deferred Rent	13,103	
Deferred Recoveries	72,140	
Grant designations payable		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	4,372,259	

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

☒

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	44,780,136
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	1,844,689
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	644,634
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	0
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	2,489,323
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	42,290,813
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	0
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	42,290,813

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	36,325,849
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	644,634
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	-8,649,075
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-8,004,441
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	44,330,290
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	0
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	44,330,290

**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
See Additional Data Table	

**Part XIII**   **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 18007697  
Software Version: 2018v3.1  
EIN: 04-2382233  
Name: UNITED WAY OF MASSACHUSETTS BAY INC

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	<p>UWMB's ENDOWMENT CONSISTS OF INDIVIDUAL DONOR-RESTRICTED ENDOWMENT FUNDS AND BOARD DESIGNATED ENDOWMENT FUNDS. TEMPORARILY RESTRICTED ENDOWMENT FUNDS INCLUDE GAINS AND EARNINGS ON PERMANENTLY RESTRICTED FUNDS IN EXCESS OF THE AMOUNTS APPROPRIATED FOR SPENDING ON A CUMULATIVE BASIS BY THE BOARD OF DIRECTORS. THE NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS INCLUDING FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. THE BOARD OF DIRECTORS OF UWMB HAS INTERPRETED THE "UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT" (UPMIFA) AS REQUIRING THE PRESERVATION OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF THE DONOR-RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO THE CONTRARY AS A RESULT OF THIS INTERPRETATION, UWMB CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS, (a) THE ORIGINAL VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT, (b) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (c) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. THE REMAINING PORTION OF THE DONOR-RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN PERMANENTLY RESTRICTED NET ASSETS IS CLASSIFIED AS TEMPORARILY RESTRICTED NET ASSETS UNTIL THOSE AMOUNTS ARE APPROPRIATED FOR EXPENDITURE BY THE BOARD OF DIRECTORS OF UWMB IN A MANNER CONSISTENT WITH THE STANDARD OF PRUDENCE PRESCRIBED BY UPMIFA. IN ACCORDANCE WITH UPMIFA, UWMB CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE ENDOWMENT FUNDS: 1) THE DURATION AND PRESERVATION OF THE FUND 2) THE PURPOSES OF UWMB AND THE DONOR-RESTRICTED ENDOWMENT FUND 3) GENERAL ECONOMIC CONDITIONS 4) THE POSSIBLE EFFECT OF INFLATION AND DEFLATION 5) THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION OF INVESTMENTS 6) OTHER RESOURCES OF UWMB 7) THE INVESTMENT POLICIES OF UWMB 8) THE ROLE OF EACH INVESTMENT IN THE WHOLE PORTFOLIO 9) THE ADEQUACY OF RESERVES</p>



## Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	UWMB ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. INTEREST AND PENALTIES ASSESSED, IF ANY, ARE ACCRUED AS INCOME TAX EXPENSE. UWMB HAS IDENTIFIED ITS STATUS AS A TAX EXEMPT ENTITY AS ITS ONLY SIGNIFICANT POSITION AND HAS DETERMINED THAT SUCH POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. UWMB IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS AFTER THE DATE OF FILING OF THE RELATED RETURN.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	Designations - -8649075



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

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		Real Estate & Building Industry Breakfast (event type)	Golf Tournament @ Oyster Harbors (event type)	25 (total number)	Total events (add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	2,017,932	613,500	2,283,710	4,915,142
	<b>2</b> Less Contributions . . . . .	1,853,729	532,456	1,413,776	3,799,961
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	164,203	81,044	869,934	1,115,181
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .	164,203	81,044	869,934	1,115,181
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				1,115,181
<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				0	

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

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

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

**b** If "No," explain \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

**b** If "Yes," explain \_\_\_\_\_

<b>11</b> Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>13</b> Indicate the percentage of gaming activity conducted in					
<b>a</b> The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 100px; text-align: center;"><b>13a</b></td><td style="width: 100px; text-align: center;">%</td></tr><tr><td style="text-align: center;"><b>13b</b></td><td style="text-align: center;">%</td></tr></table>	<b>13a</b>	%	<b>13b</b>	%
<b>13a</b>	%				
<b>13b</b>	%				
<b>b</b> An outside facility					

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► .....

Address ► .....

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

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

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

Name ► .....

Address ► .....

**16** Gaming manager information

Name ► .....

Gaming manager compensation ► \$ .....

Description of services provided ► .....

☐ Director/officer

☐ Employee

☐ Independent contractor

**17** Mandatory distributions

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

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

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

Return Reference

Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I  
(Form 990)

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States  
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public  
Inspection

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
UNITED WAY OF MASSACHUSETTS BAY INC

Employer identification number

04-2382233

Part I General Information on Grants and Assistance

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 387

3 Enter total number of other organizations listed in the line 1 table . . . . . 0

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**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	PARTNER ORGANIZATIONS RECEIVING DISCRETIONARY FUNDING FROM UWMB UNDERGO INTENSIVE PRE-SCREENING BEFORE BEING AWARDED FUNDING, INCLUDING BUT NOT LIMITED TO, AN APPLICATION PROCESS THAT INCLUDES EXPLANATION OF PROPOSED USE AND RESULTS OF FUNDING UWMB ENGAGES MULTIPLE VOLUNTEER REVIEW COMMITTEES TO REVIEW APPLICATIONS AND RECOMMEND FUNDING TO UWMB'S COMMUNITY IMPACT COMMITTEE UWMB REQUIRES THAT ALL PARTNER AGENCIES SIGN A MEMORANDUM OF UNDERSTANDING AGREEING TO GENERAL PROVISIONS, REPORTING REQUIREMENTS, AND COMPLIANCE WITH APPLICABLE STATE AND FEDERAL REGULATIONS IN ADDITION, UWMB'S COMMUNITY IMPACT STAFF, REGULARLY COMMUNICATE AND MONITOR AGENCIES' COMPLIANCE WITH THE MEMORANDUM OF UNDERSTANDING INCLUDING PROGRESS AGAINST AGREED UPON PROGRAMMATIC OUTCOMES AND DELIVERABLES TO ENSURE UWMB IS ACHIEVING ITS MISSION

Additional Data

Software ID: 18007697  
Software Version: 2018v3.1  
EIN: 04-2382233  
Name: UNITED WAY OF MASSACHUSETTS BAY INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Catholic Charities - Boston 275 W Broadway South Boston, MA 02127	04-2534041	501(c)(3)	742,853		N/A	N/A	Community Impact
Boys & Girls Clubs of Boston 200 High St Ste 3 B Boston, MA 02110	04-2103922	501(c)(3)	707,805		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Combined Jewish Philanthropies 126 High St Boston, MA 02110	04-2103559	501(c)(3)	496,910		N/A	N/A	Community Impact
Lynn Housing Authority & Development Group Inc 10 Church St Lynn, MA 01902	04-6003214	501(c)(3)	382,485		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nurtury 2201 Washington St 306 Suite 306 Roxbury, MA 02119	04-2105893	501(c)(3)	374,948		N/A	N/A	Community Impact
Roca Inc 101 Park St Chelsea, MA 02150	22-3223641	501(c)(3)	327,892		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Quincy Community Action Programs Inc 1509 Hancock St Quincy, MA 02169	04-2391348	501(c)(3)	308,986		N/A	N/A	Community Impact
Jewish Vocational Services 75 Federal St Boston, MA 02110	04-2104357	501(c)(3)	301,065		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NeighborWorks Southern Mass 422 Washington St Quincy, MA 02169	04-2732439	501(c)(3)	296,887		N/A	N/A	Community Impact
Lawrence Community Works 168 Newbury St Lawrence, MA 01841	04-2982308	501(c)(3)	290,153		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
College Bound Dorchester 18 Samoset St Dorchester, MA 02124	04-2383512	501(c)(3)	253,928		N/A	N/A	Community Impact
Neighborhood Developers 4 Gerrish Ave Chelsea, MA 02150	04-2660283	501(c)(3)	370,038		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston Local Development Corporation (BLDC) 43 Hawkins St Ste 2A Boston, MA 02114	04-2681311	501(c)(3)	223,251		N/A	N/A	Community Impact
Boston After School & Beyond Inc 89 South Street Boston, MA 02111	20-1308560	501(c)(3)	210,413		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jamaica Plain Neighborhood Development Corporation 31 Germania St Jamaica Plain, MA 02130	04-2652919	501(c)(3)	207,584		N/A	N/A	Community Impact
Neighborhood Affordable Housing NOAH MA 143 Border St East Boston, MA 02128	04-2964630	501(c)(3)	199,432		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project Hope 550 Dudley St Boston, MA 02119	04-2748880	501(c)(3)	193,955		N/A	N/A	Community Impact
Heading Home Inc The Schrafft Center Ste 100 529 Main Street Charlestown, MA 02129	23-7364546	501(c)(3)	190,668		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Teamwork Inc 155 Merrimack St Fl 2 Lowell, MA 01852	04-2382027	501(c)(3)	184,085		N/A	N/A	Community Impact
Homestart Inc 105 Chauncy St Ste 502 Suite 502 Boston, MA 02111	04-3311270	501(c)(3)	173,918		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STARS 200 Middle St East Weymouth, MA 02189	23-7097840	501(c)(3)	168,000		N/A	N/A	Community Impact
Mass211 Inc c/o UW of TriCounty 46 Park Street Framingham, MA 01702	04-2104231	501(c)(3)	155,310		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Lawrence Community Action Council Inc 305 Essex St 4th Fl Lawrence, MA 01840	04-2397449	501(c)(3)	154,330		N/A	N/A	Community Impact
Fenway Community Development Corporation 70 Burbank St Boston, MA 02115	04-2666507	501(c)(3)	139,500		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Haitian Project Inc PO Box 6891 Providence, RI 02940	22-2700013	501(c)(3)	133,606		N/A	N/A	Community Impact
YMCA of Greater Boston 316 Huntington Ave Boston, MA 02115	04-2103551	501(c)(3)	130,238		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Asian Community Development Corporation Attn Suzie Kim 38 Oak Street Boston, MA 02111	04-2988263	501(c)(3)	126,804		N/A	N/A	Community Impact
Boston Private Industry Council 2 Oliver Street Fl 7 Boston, MA 02109	04-2676661	501(c)(3)	122,709		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Big Sister Association of Greater Boston 20 Park Plaza Ste 1420 Boston, MA 02116	04-2150651	501(c)(3)	114,495		N/A	N/A	Community Impact
Sociedad Latina Inc 1530 Tremont St Roxbury, MA 02120	04-2678255	501(c)(3)	111,098		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bridge Over Troubled Waters Inc 47 West St Boston, MA 02111	04-2472126	501(c)(3)	111,053		N/A	N/A	Community Impact
Home For Little Wanderers 10 Guest St Ste 300 Boston, MA 02135	04-2104764	501(c)(3)	110,822		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HEARTH 1640 Washington St Boston, MA 02118	22-3135170	501(c)(3)	110,200		N/A	N/A	Community Impact
Father Bill's & MainSpring 422 Washington St Ste 2 Quincy, MA 02169	22-2538039	501(c)(3)	109,423		N/A	N/A	Community Impact



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Urban Edge 1542 Columbus Ave Ste 2 Roxbury, MA 02119	22-2483475	501(c)(3)	109,266		N/A	N/A	Community Impact
Girl Scouts of Eastern MA 95 Berkeley St Boston, MA 02116	04-2703281	501(c)(3)	106,000		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Greater Boston Legal Services 197 Friend St Boston, MA 02114	04-2103907	501(c)(3)	105,023		N/A	N/A	Community Impact
North Shore Community Development Coalition 98 Lafayette St Salem, MA 01970	04-2686893	501(c)(3)	101,826		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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South Middlesex Opportunity Council Inc 7 Bishop St Framingham, MA 01702	04-2389659	501(c)(3)	101,510		N/A	N/A	Community Impact
Big Brothers Big Sisters Association of Massachusetts Bay 75 Federal St Fl 5 5Th Floor Boston, MA 02110	04-2074462	501(c)(3)	100,019		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MA Society for the Prevention of Cruelty for Children 3815 Washington St Ste 2 Jamaica Plain, MA 02130	04-2103597	501(c)(3)	98,519		N/A	N/A	Community Impact
Boston Opportunity Agenda 75 Arlington St 3rd Fl Boston, MA 02116	04-2104021	501(c)(3)	95,000		N/A	N/A	Community Impact

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Pine Street Inn Inc 444 Harrison Ave Boston, MA 02118	04-2516093	501(c)(3)	94,422		N/A	N/A	Community Impact
Worcester Common Ground 5 Piedmont St Worcester, MA 01610	22-2976657	501(c)(3)	89,248		N/A	N/A	Community Impact

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Allston-Brighton Community Development Corporation 18 Shepard St Ste 100 Brighton, MA 02135	04-2716278	501(c)(3)	86,269		N/A	N/A	Community Impact
Girls Incorporated of Lynn 50 High St Lynn, MA 01902	04-2104250	501(c)(3)	82,576		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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East Boston Social Centers 68 Central Sq East Boston, MA 02128	04-2104257	501(c)(3)	82,289		N/A	N/A	Community Impact
Asian American Civic Association 87 Tyler St Fl 5 Boston, MA 02111	04-2476258	501(c)(3)	82,287		N/A	N/A	Community Impact

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Lahey Health Behavioral Services 199 Rosewood Dr Ste 250 Danvers, MA 01923	04-2777145	501(c)(3)	77,737		N/A	N/A	Community Impact
For Kids Only Afterschool 194 Essex St Salem, MA 01970	04-3037204	501(c)(3)	77,516		N/A	N/A	Community Impact



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Lynn Shelter Association 100 Willow St Ste 103 Lynn, MA 01901	22-2603594	501(c)(3)	77,499		N/A	N/A	Community Impact
UTEC Inc 15 Warren St 3 Lowell, MA 01852	38-3669532	501(c)(3)	77,345		N/A	N/A	Community Impact

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Inquilions Boricuas en Accion (IBA) 405 Shawmut Ave Roxbury, MA 02118	23-7090081	501(c)(3)	76,258		N/A	N/A	Community Impact
Dana-Farber Cancer Institute 10 Brookline Place West 6th Fl Boston, MA 02445	04-2263040	501(c)(3)	75,893		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Nuestra Comunidad Development Corporation 56 Warren St Ste 200 Suite 200 Roxbury, MA 02119	04-2741543	501(c)(3)	74,596		N/A	N/A	Community Impact
Commonwealth Land Trust Inc 1059 Tremont St Suite 2 Roxbury Crossing, MA 02120	22-2753637	501(c)(3)	72,200		N/A	N/A	Community Impact

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WATCH CDC 24 Crescent St Ste 201 Waltham, MA 02453	22-2918528	501(c)(3)	72,036		N/A	N/A	Community Impact
Codman Square Neighborhood Development Corporation 587 Washington St Dorchester, MA 02124	04-2752507	501(c)(3)	70,379		N/A	N/A	Community Impact

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YMCA of the North Shore 245 Cabot St Beverly, MA 01915	04-2104913	501(c)(3)	69,390		N/A	N/A	Community Impact
Children's Services of Roxbury 520 Dudley St Roxbury, MA 02119	04-3082352	501(c)(3)	69,368		N/A	N/A	Community Impact

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Playworks Massachusetts 67 Kemble St Ste 36 Boston, MA 02119	94-3251867	501(c)(3)	69,064		N/A	N/A	Community Impact
Gregg Neighborhood House Association 106 BRd St Lynn, MA 01902	04-6073599	501(c)(3)	69,000		N/A	N/A	Community Impact

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South Boston Neighborhood House 136 H St South Boston, MA 02127	04-2104807	501(c)(3)	66,705		N/A	N/A	Community Impact
Action Incorporated 180 Main St Gloucester, MA 01930	04-2389332	501(c)(3)	65,703		N/A	N/A	Community Impact

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Victory Programs 965 Massachusetts Ave Boston, MA 02118	04-2575322	501(c)(3)	64,111		N/A	N/A	Community Impact
Health Resources in Action (HRIA) 95 Berkeley St Boston, MA 02116	04-2229839	501(c)(3)	64,084		N/A	N/A	Community Impact



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The Community Group 190 Hampshire St Lawrence, MA 01840	04-2473133	501(c)(3)	63,378		N/A	N/A	Community Impact
Boys & Girls Clubs of Medford and Somerville 11 Salem St Suite 15 Medford, MA 02155	23-7072768	501(c)(3)	62,866		N/A	N/A	Community Impact

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City Year Boston 287 Columbus Ave Boston, MA 02116	22-2882549	501(c)(3)	62,388		N/A	N/A	Community Impact
YWCA Malden 54 Washington St Malden, MA 02148	04-2125009	501(c)(3)	61,424		N/A	N/A	Community Impact

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International Institute of Boston 2 Bolyston St 3rd Fl Boston, MA 02116	04-2104325	501(c)(3)	61,376		N/A	N/A	Community Impact
Community Action Partnership of Strafford County Attn Betsey Andrews Parker PO Box 160 Dover, NH 03821	02-0268636	501(c)(3)	61,000		N/A	N/A	Community Impact

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Boys and Girls Clubs of Dorchester 1135 Dorchester Ave Dorchester, MA 02125	23-7076465	501(c)(3)	59,442		N/A	N/A	Community Impact
Groundwork Lawrence 50 Island St Ste 101 Lawrence, MA 01840	04-3546770	501(c)(3)	59,273		N/A	N/A	Community Impact

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FamilyAid Boston 727 Atlantic Ave Ste 100 Boston, MA 02111	04-2105756	501(c)(3)	58,399		N/A	N/A	Community Impact
Family & Children's Services of Gtr Lynn 111 North Common St Lynn, MA 01902	04-2235959	501(c)(3)	58,377		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Bay Cove Human Services 66 Canal St Boston, MA 02114	04-2518575	501(c)(3)	58,330		N/A	N/A	Community Impact
Madison Park Development Corporation 184 Dudley St Ste 102 Roxbury, MA 02119	23-7164223	501(c)(3)	58,096		N/A	N/A	Community Impact

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Community Work Sevices 174 Portland St Boston, MA 02114	04-2103560	501(c)(3)	58,000		N/A	N/A	Community Impact
South Boston NDC 373 D St Boston, MA 02127	04-3023407	501(c)(3)	57,292		N/A	N/A	Community Impact

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Brookline Community Mental Health Center 41 Garrison Rd Brookline, MA 02445	04-2263744	501(c)(3)	57,284		N/A	N/A	Community Impact
Hyde Square Task Force 30 Sunnyside St Jamaica Plain, MA 02130	04-3118543	501(c)(3)	56,595		N/A	N/A	Community Impact



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MACDC Inc 15 Court Sq Ste 600 Boston, MA 02108	04-2759909	501(c)(3)	56,404		N/A	N/A	Community Impact
Metro West Collaborative Development 79-B Chapel Street Newton, MA 02458	22-3073668	501(c)(3)	55,800		N/A	N/A	Community Impact

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Friends of St Stephen's Youth Program 31 Lenox Street Boston, MA 02118	26-1749602	501(c)(3)	55,633		N/A	N/A	Community Impact
New England Center for Homeless Veterans 17 Court St Boston, MA 02108	04-3007211	501(c)(3)	55,405		N/A	N/A	Community Impact

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Ellis Memorial & Eldredge House Inc 58 Berkeley St Boston, MA 02116	04-2104168	501(c)(3)	55,183		N/A	N/A	Community Impact
Friends of the Homeless Inc 769 Worthington St Springfield, MA 01105	22-2786732	501(c)(3)	55,142		N/A	N/A	Community Impact

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Somerville Community Corporation 337 Somerville Ave 2 Somerville, MA 02143	23-7293380	501(c)(3)	55,011		N/A	N/A	Community Impact
Southern New Hampshire Services 40 Pine St Manchester, NH 03103	02-0268285	501(c)(3)	55,000		N/A	N/A	Community Impact

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Boston Public Health Commission 1010 Massachusetts Ave Boston, MA 02118	04-3316655	501(c)(3)	54,500		N/A	N/A	Community Impact
UW of Tri-County 46 Park St Framingham, MA 01702	04-2104231	501(c)(3)	53,965		N/A	N/A	Community Impact

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Casa Myrna Vazquez Inc 38 Wareham St Boston, MA 02118	04-2625710	501(c)(3)	53,934		N/A	N/A	Community Impact
Boston Asian Youth Essential Service 199 Harrison Ave Boston, MA 02111	23-7288855	501(c)(3)	53,772		N/A	N/A	Community Impact

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Latino Stem Alliance Inc 20 Moraine St Boston, MA 02130	27-1941096	501(c)(3)	53,039		N/A	N/A	Community Impact
YouthBuild Boston 27 Centre St Roxbury, MA 02119	04-3080098	501(c)(3)	53,000		N/A	N/A	Community Impact

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Metro Housing Boston 1411 Tremont St Boston, MA 02120	04-2775991	501(c)(3)	52,500		N/A	N/A	Community Impact
Operation ABLE of Greater Boston Inc 174 Portland St Fl 5 Boston, MA 02114	04-2731871	501(c)(3)	52,215		N/A	N/A	Community Impact



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Cambridge Family & Children's Service 60 Gore St Cambridge, MA 02141	04-2104057	501(c)(3)	52,064		N/A	N/A	Community Impact
Family Services of the Merrimack Valley Inc 430 North Canal St Lawrence, MA 01840	04-2104054	501(c)(3)	51,909		N/A	N/A	Community Impact

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Boston Scores 29 Germania Street Jamaica Plain, MA 02130	04-3482756	501(c)(3)	51,417		N/A	N/A	Community Impact
YMCA of Metro North 2 Centennial Dr Ste 4A Peabody, MA 01960	04-2105883	501(c)(3)	51,099		N/A	N/A	Community Impact

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NewVue Communities 470 Main St Fitchburg, MA 01420	04-2690210	501(c)(3)	51,000		N/A	N/A	Community Impact
Riverside Community Care Inc 270 Bridge St Ste 301 Suite 301 Dedham, MA 02026	04-3097170	501(c)(3)	50,942		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Crispus Attucks Children's Center 105 Crawford St Dorchester, MA 02121	04-2457984	501(c)(3)	50,693		N/A	N/A	Community Impact
Somerville Homeless Coalition One Davis Sq Basement Somerville, MA 02144	04-2897447	501(c)(3)	49,514		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Granite United Way 22 Concord St Floor 2 Manchester, NH 03101	02-6006033	501(c)(3)	49,370		N/A	N/A	Community Impact
Urban League of Eastern Massachusetts 88 Warren St Roxbury, MA 02119	23-7349132	501(c)(3)	48,209		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Year Up Inc 45 Milk St 9th Flr Boston, MA 02109	04-3534407	501(c)(3)	47,612		N/A	N/A	Community Impact
Dorchester Bay Economic Development Corporation 594 Columbia Rd Ste 302 Suite 302 Dorchester, MA 02125	04-2681632	501(c)(3)	46,587		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Act Lawrence 15 Union St 4th Fl Ste 409 Lawrence, MA 01840	04-3408855	501(c)(3)	46,500		N/A	N/A	Community Impact
Lena Park Community Development Corporation 150 American Legion Highway Dorchester, MA 02124	04-2531287	501(c)(3)	46,500		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Southwest Boston CDC 11 Fairmount Ave Ste 101 Hyde Park, MA 02136	04-3562853	501(c)(3)	46,500		N/A	N/A	Community Impact
Renewal Christian Church P O Box 990781 Boston, MA 02199	46-1855736	501(c)(3)	45,519		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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New Hope Inc 140 Park Street Attleboro, MA 02703	04-2681340	501(c)(3)	45,501		N/A	N/A	Community Impact
West End House Boys & Girls Club 105 Allston St Allston, MA 02134	04-2105825	501(c)(3)	44,830		N/A	N/A	Community Impact

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The Open Door 28 Emerson Ave Gloucester, MA 01930	22-2513482	501(c)(3)	44,764		N/A	N/A	Community Impact
Elizabeth Stone House 8 Notre Dame St Boston, MA 02119	51-0192418	501(c)(3)	44,350		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Housing Families Inc 919 Eastern Ave Malden, MA 02148	04-2925846	501(c)(3)	43,402		N/A	N/A	Community Impact
CDC of South Berkshire PO Box 733 Great Barrington, MA 01230	04-3010725	501(c)(3)	42,834		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Franklin County CDC 324 Wells St Greenfield, MA 01301	04-2678309	501(c)(3)	42,834		N/A	N/A	Community Impact
McLean Hospital Corporation 115 Mill Steret Belmont, MA 02478	04-2697981	501(c)(3)	42,382		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Emmaus Inc 127 How St P O Box 568 Haverhill, MA 01831	22-2702774	501(c)(3)	42,121		N/A	N/A	Community Impact
Greater Seacoast Community Health 100 Campus Drive Suite 12 Portsmouth, NH 03801	02-0304203	501(c)(3)	42,084		N/A	N/A	Community Impact

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Hilltown CDC 387 Main Road PO Box 17 Chesterfield, MA 01012	04-2741009	501(c)(3)	41,904		N/A	N/A	Community Impact
Main South CDC 875 Main St Worcester, MA 01610	04-2921465	501(c)(3)	41,904		N/A	N/A	Community Impact

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Oak Hill CDC 74 Providence St Worcester, MA 01604	22-2599363	501(c)(3)	41,904		N/A	N/A	Community Impact
Quaboag Valley CDC 23 West Main St Ware, MA 01082	04-3370097	501(c)(3)	41,904		N/A	N/A	Community Impact

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Valley CDC 30 Market St Northhampton, MA 01060	22-2906466	501(c)(3)	41,904		N/A	N/A	Community Impact
Pathways for Children Inc 29 Emerson Ave Gloucester, MA 01930	04-2694002	501(c)(3)	41,426		N/A	N/A	Community Impact



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Harborlight Community Partners PO Box 507 Beverly, MA 01905	04-2313571	501(c)(3)	41,345		N/A	N/A	Community Impact
Community Action Inc 3 Washington Sq Fl 4 Haverhill, MA 01830	04-2383153	501(c)(3)	41,202		N/A	N/A	Community Impact

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Children's Law Center of Massachusetts 298 Union St Lynn, MA 01903	04-2622153	501(c)(3)	40,311		N/A	N/A	Community Impact
UW of Greater Plymouth County 934 West Chestnut St Brockton, MA 02301	04-2103940	501(c)(3)	40,005		N/A	N/A	Community Impact

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Citizens Housing & Planning Association (CHAPA) 18 Tremont St Ste 401 Boston, MA 02108	04-6138418	501(c)(3)	40,000		N/A	N/A	Community Impact
Westgate Church 100 Winter St Weston, MA 02493	04-2583018	501(c)(3)	39,707		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Boys & Girls Club of Greater Lowell Inc 657 Middlesex St Lowell, MA 01851	04-2104396	501(c)(3)	39,662		N/A	N/A	Community Impact
Girls Inc of Greater Lowell 220 Worthen St Lowell, MA 01852	04-2104401	501(c)(3)	38,991		N/A	N/A	Community Impact

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Housing Assistance Corporation 460 West Main St Hyannis, MA 02601	23-7431255	501(c)(3)	38,200		N/A	N/A	Community Impact
Boys and Girls Club of Taunton 31 Court Street Taunton, MA 02780	04-2133246	501(c)(3)	38,051		N/A	N/A	Community Impact

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Steppingstone Inc 522 N Main St Fall River, MA 02720	04-2505146	501(c)(3)	38,000		N/A	N/A	Community Impact
Horizons for Homeless Children 1705 Columbus Ave Roxbury, MA 02119	22-2915188	501(c)(3)	38,000		N/A	N/A	Community Impact

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Boston Living Center 29 Stanhope Street Boston, MA 02116	04-2575322	501(c)(3)	36,666		N/A	N/A	Community Impact
Roxbury Center for Financial Empowerment 7 Palmer St 2nd Fl Roxbury, MA 02119	04-2582188	501(c)(3)	36,666		N/A	N/A	Community Impact

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More Than Words Inc 56 Telton Street Attn Betsy Sylva Waltham, MA 02453	04-2784985	501(c)(3)	36,415		N/A	N/A	Community Impact
Greater Attleboro Tauton Regional Transit Authority 10 Oak Street Tauton, MA 02780	04-2104020	501(c)(3)	36,400		N/A	N/A	Community Impact



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Asian Task Force Against Domestic Violence PO Box 120108 Boston, MA 02112	04-3103354	501(c)(3)	36,164		N/A	N/A	Community Impact
Friends of Youth Opportunities 7 Palmer St Fl 2 Boston, MA 02119	20-8345272	501(c)(3)	36,000		N/A	N/A	Community Impact

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United South End Settlements 566 Columbus Ave Harriet Tubman House Boston, MA 02118	04-2104280	501(c)(3)	35,398		N/A	N/A	Community Impact
Family Nurturing Center 200 Bowdoin St Dorchester, MA 02122	31-1626186	501(c)(3)	35,060		N/A	N/A	Community Impact

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Cape and Islands United Way P O Box 367 Centerville, MA 02632	04-2271714	501(c)(3)	35,019		N/A	N/A	Community Impact
YMCA of Attleboro 63 North Main Street Attleboro, MA 02703	04-2255819	501(c)(3)	34,577		N/A	N/A	Community Impact

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Silver Lining Mentoring 727 Atlantic Ave 3rd Fl Boston, MA 02111	04-3575764	501(c)(3)	34,228		N/A	N/A	Community Impact
City of Dover 288 Central Ave Dover, NH 03820	99-9999999	501(c)(3)	34,100		N/A	N/A	Community Impact

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The Spirit of Adventure Council - Boy Scouts of America 2 Tower Office Park Woburn, MA 01801	22-1576300	501(c)(3)	34,028		N/A	N/A	Community Impact
Catholic Social Services PO Box M South Station Fall River, MA 02727	04-2106394	501(c)(3)	33,600		N/A	N/A	Community Impact

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South End Community Health Center 1601 Washington St 1st Fl Boston, MA 02118	04-2456134	501(c)(3)	33,061		N/A	N/A	Community Impact
Beverly Children's Learning Center 550 Cabot St Beverly, MA 01915	23-7267243	501(c)(3)	32,886		N/A	N/A	Community Impact

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Greater Boston Food Bank 70 South Bay Ave Boston, MA 02118	04-2717782	501(c)(3)	32,282		N/A	N/A	Community Impact
Foley Hoag Foundation 144 Seaport Boulevard Boston, MA 02210	04-2716893	501(c)(3)	31,781		N/A	N/A	Community Impact

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Massachusetts Advocates for Children 25 Kingston St Fl 2 Boston, MA 02111	04-2488456	501(c)(3)	31,763		N/A	N/A	Community Impact
UW of Central Carolinas 301 S Brevard St Charlotte, NC 28202	56-0529948	501(c)(3)	31,736		N/A	N/A	Community Impact



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Merrimack Valley Food Bank Inc 735 Broadway St Lowell, MA 01854	22-3241609	501(c)(3)	31,618		N/A	N/A	Community Impact
YWCA of Northeastern Massachusetts 38 Lawrence Street Lawrence, MA 01840	04-2130847	501(c)(3)	31,607		N/A	N/A	Community Impact

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UW of Greater New Bedford 128 Union St Ste 105 New Bedford, MA 02740	04-2104264	501(c)(3)	31,579		N/A	N/A	Community Impact
American Red Cross of Massachusetts 101 Station Lndg Ste 501 Medford, MA 02155	53-0196605	501(c)(3)	31,302		N/A	N/A	Community Impact

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Future Chefs 38 Lawrence Street Boston, MA 02119	04-2261109	501(c)(3)	31,071		N/A	N/A	Community Impact
Mujeres Unidas Avanzando 54 Clayton St Ste 1 Dorchester, MA 02122	04-2753429	501(c)(3)	30,861		N/A	N/A	Community Impact

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Robbins Children's Program 803 N Main St Attleboro, MA 02703	04-2528542	501(c)(3)	30,800		N/A	N/A	Community Impact
Roxbury Youthworks Inc 841 Parker Sreet Unit 104-106 Roxbury Crossing, MA 02120	04-2733854	501(c)(3)	30,664		N/A	N/A	Community Impact

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Citizens Schools 308 Congress St 5th Fl Boston, MA 02210	04-3259160	501(c)(3)	30,349		N/A	N/A	Community Impact
Friends of Brookline Rowing 11 Shaw Road Brookline, MA 02467	45-4754365	501(c)(3)	30,123		N/A	N/A	Community Impact

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Northeast Legal Aid 50 Island Street Lawrence, MA 01840	23-7381007	501(c)(3)	30,000		N/A	N/A	Community Impact
Strategies for Children Inc 400 Atlantic Ave Boston, MA 02110	04-3551406	501(c)(3)	30,000		N/A	N/A	Community Impact

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Waltham Boys & Girls Club 20 Exchange Street Waltham, MA 02451	04-2103927	501(c)(3)	29,799		N/A	N/A	Community Impact
Wellspring House Inc 302 Essex Ave Gloucester, MA 01930	04-2735048	501(c)(3)	29,485		N/A	N/A	Community Impact

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Sportsmen's Tennis Club 950 Blue Hill Avenue Dorchester, MA 02124	23-7037183	501(c)(3)	28,616		N/A	N/A	Community Impact
Community Counseling of Bristol County Inc Mill River Professional Center One Washington Street Taunton, MA 02780	04-3035697	501(c)(3)	28,430		N/A	N/A	Community Impact



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Malden YMCA 99 Dartmouth St Malden, MA 02148	04-2105874	501(c)(3)	28,114		N/A	N/A	Community Impact
Lynn Economic Opportunity Inc (LEO) 156 BRd St Lynn, MA 01901	04-2378885	501(c)(3)	28,000		N/A	N/A	Community Impact

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Narragansett Council of the Boy Scouts of America P O Box 14777 East Providence, RI 02914	05-0308384	501(c)(3)	28,000		N/A	N/A	Community Impact
Boston Medical Center (Healthy Steps) Vose Hall 4th Floor Rm 419 Boston, MA 02118	04-3314093	501(c)(3)	28,000		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Massachusetts Coalition for the Homeless 73 Buffum St Lynn, MA 01902	22-2599662	501(c)(3)	27,722		N/A	N/A	Community Impact
ENROOT 99 Bishop Allen Dr Cambridge, MA 02139	04-2103961	501(c)(3)	27,704		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Thompson Island Outward Bound Education Ctr 5 Drydock Ave Boston, MA 02127	04-3027900	501(c)(3)	27,370		N/A	N/A	Community Impact
BEST Corporation 101 Station Lndg - Suite 401 Medford, MA 02155	20-0917822	501(c)(3)	27,084		N/A	N/A	Community Impact

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Resilient Coders 50 Milk Street 16th Floor Boston, MA 02109	47-1882343	501(c)(3)	27,042		N/A	N/A	Community Impact
Pan-Massachusetts Challenge 77 Fourth Ave Needham, MA 02494	04-2746912	501(c)(3)	26,730		N/A	N/A	Community Impact

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Disability Law Center 11 Beacon St Ste 925 Boston, MA 02108	04-2741869	501(c)(3)	26,624		N/A	N/A	Community Impact
CitySprouts 678 Massachusetts Ave Cambridge, MA 02139	04-3521413	501(c)(3)	26,024		N/A	N/A	Community Impact

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Codman Square Health Center 637 Washington Street Dorchester, MA 02124	04-2678774	501(c)(3)	25,905		N/A	N/A	Community Impact
Action for Boston Community Development 178 Tremont St Boston, MA 02111	04-2304133	501(c)(3)	25,773		N/A	N/A	Community Impact

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Partners for Youth with Disabilities 95 Berkeley St Ste 109 Boston, MA 02116	22-2627798	501(c)(3)	25,237		N/A	N/A	Community Impact
The Arc of Bristol County Inc 141 Park St Attleboro, MA 02703	04-2281165	501(c)(3)	25,200		N/A	N/A	Community Impact



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Transition House Inc 136 Bishop Allen Dr Fl 2 Cambridge, MA 02139	04-2631789	501(c)(3)	25,041		N/A	N/A	Community Impact
Third Sector New England Inc 89 South St Ste 700 Boston, MA 02111	04-2261109	501(c)(3)	25,000		N/A	N/A	Community Impact

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Blue Cross Blue Shield of MA Foundation 101 Huntington Avenue Suite 1300 Boston, MA 02199	04-3148824	501(c)(3)	24,941		N/A	N/A	Community Impact
Mental Health Association Inc 995 Worthington St Springfield, MA 01109	04-6197938	501(c)(3)	24,785		N/A	N/A	Community Impact

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Council of Social Concern 2 Merrimac St Woburn, MA 01801	04-2494773	501(c)(3)	24,631		N/A	N/A	Community Impact
Boston Center for Independent Living Inc(BCIL) 60 Temple Place Fl 5 Boston, MA 02111	04-2546595	501(c)(3)	24,235		N/A	N/A	Community Impact

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Vietnamese American Initiative for Development 42 Charles St Boston, MA 02122	04-3289039	501(c)(3)	24,217		N/A	N/A	Community Impact
UW of Pioneer Valley 1441 Main St Ste 147 Springfield, MA 01103	04-2152680	501(c)(3)	24,101		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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YWCA of Boston 140 Clarendon St Ste 403 Boston, MA 02116	04-2103548	501(c)(3)	23,689		N/A	N/A	Community Impact
Old Colony YMCA 71 Cohannet Street Tauton, MA 02780	04-2125014	501(c)(3)	23,520		N/A	N/A	Community Impact

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Girls Incorporated of Taunton 131 Arlington Street Taunton, MA 02780	04-2104248	501(c)(3)	23,492		N/A	N/A	Community Impact
The Literacy Center Inc 80 North Main Street Attleboro, MA 02703	22-3180555	501(c)(3)	23,240		N/A	N/A	Community Impact

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Eliot Community Human Services 125 Hartwell Ave Lexington, MA 02421	04-2316924	501(c)(3)	22,800		N/A	N/A	Community Impact
Rochester Child Care Center Inc 95 Charles Street Rochester, NH 03867	02-0327002	501(c)(3)	22,260		N/A	N/A	Community Impact

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Mass Mentoring Partnership 75 Kneeland St 11th Fl Boston, MA 02111	22-3207958	501(c)(3)	22,129		N/A	N/A	Community Impact
American Credit Counseling Services Inc 4 Taunton St Suite 5 Tauton, MA 02762	04-3155735	501(c)(3)	21,840		N/A	N/A	Community Impact



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Trinity Boston Foundation 206 Clarendon St Boston, MA 02116	04-2736718	501(c)(3)	21,580		N/A	N/A	Community Impact
Massachusetts Alliance of Portugese Speakers 1046 Cambridge St Cambridge, MA 02139	04-2596270	501(c)(3)	21,291		N/A	N/A	Community Impact

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Hattie B Cooper Community Center 1891 Washington St Boston, MA 02118	04-2173420	501(c)(3)	21,158		N/A	N/A	Community Impact
Massachusetts Immigrant & Refugee Advocacy Coalition 105 Chauncy St Fl 9 Boston, MA 02111	22-3115048	501(c)(3)	20,856		N/A	N/A	Community Impact

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The General Hospital Corporation - MGH CCHI 100 Cambridge Street Suite 1310 Boston, MA 02114	04-2697983	501(c)(3)	20,747		N/A	N/A	Community Impact
Citizen Schools 1 Beacon Street 2nd Floor Boston, MA 02210	04-3259160	501(c)(3)	20,477		N/A	N/A	Community Impact

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Lawrence Boys & Girls Club 136 Water St Lawrence, MA 01841	04-2104377	501(c)(3)	20,370		N/A	N/A	Community Impact
HealthCare Options Inc 10 Emory Street Attleboro, MA 02703	22-2543620	501(c)(3)	20,160		N/A	N/A	Community Impact

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Cathedral High School 74 Union Park Roxbury, MA 02118	04-2106166	501(c)(3)	20,060		N/A	N/A	Community Impact
X-Cel Inc 7 Glenvale Terr 2 Jamaica Plain, MA 02130	04-3492163	501(c)(3)	20,051		N/A	N/A	Community Impact

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Mental Health Association of Gtr Lowell 99 Church St Lowell, MA 01852	04-2180222	501(c)(3)	20,039		N/A	N/A	Community Impact
Community Labor United Inc 8 Beacon Street 5th Floor Boston, MA 02108	04-2261109	501(c)(3)	20,000		N/A	N/A	Community Impact

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Boston Health Care for the Homeless Program Inc 780 Albay St Boston, MA 02118	04-3160480	501(c)(3)	19,974		N/A	N/A	Community Impact
Hockomock Area YMCA 300 Elmwood Street North Attleboro, MA 02760	04-2131749	501(c)(3)	19,735		N/A	N/A	Community Impact

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East End House 105 Spring St East Cambridge, MA 02141	04-2104163	501(c)(3)	19,599		N/A	N/A	Community Impact
Salvation Army Attleboro PO Box 2611 Attleboro, MA 02703	13-5562351	501(c)(3)	19,518		N/A	N/A	Community Impact



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Elizabeth Peabody House 275277 BRdway Somerville, MA 02145	04-2104827	501(c)(3)	19,048		N/A	N/A	Community Impact
Friends of Children-Boston 184 Dudley Street - Suite 100 Roxbury, MA 02119	20-1581289	501(c)(3)	19,000		N/A	N/A	Community Impact

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Crossroads for Kids MA 119 Myrtle Street Duxbury, MA 02332	04-2103837	501(c)(3)	18,798		N/A	N/A	Community Impact
University of Massachusetts Boston 100 Morrissey Boulevard Boston, MA 02125	04-3167352	501(c)(3)	18,451		N/A	N/A	Community Impact

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Boys and Girls Club of Greater Haverhill 55-57 Emerson Street PO Box 483 Haverhill, MA 01830	04-2111215	501(c)(3)	18,447		N/A	N/A	Community Impact
Goodwin Community Health 311 Route 108 Somersworth, NH 03878	02-0304203	501(c)(3)	18,184		N/A	N/A	Community Impact

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Youthbuild Lawrence 355 Haverhill St Lawrence, MA 01841	04-3177142	501(c)(3)	18,078		N/A	N/A	Community Impact
La Alianza Hispana 1000 Massachusetts Ave 101 Boston, MA 02118	23-7121158	501(c)(3)	18,035		N/A	N/A	Community Impact

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Family ACCESS of Newton 492 Waltham St Newton, MA 02465	04-2232418	501(c)(3)	17,866		N/A	N/A	Community Impact
Samaritans Inc 41 West St Fl 4 Boston, MA 02111	04-2643466	501(c)(3)	17,815		N/A	N/A	Community Impact

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St Vincent de Paul - Attleboro District 6 Tanya Drive Mansfield, MA 02048	55-0812695	501(c)(3)	17,608		N/A	N/A	Community Impact
Early Learning New Hampshire 2 Delta Drive Concord, NH 03301	02-0517109	501(c)(3)	17,500		N/A	N/A	Community Impact

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SHARE Fund Inc 150 Wakefield St - Ste 14 Rochester, NH 03867	26-3695848	501(c)(3)	17,500		N/A	N/A	Community Impact
Raw Art Works 37 Central Sq Lynn, MA 01901	22-2854850	501(c)(3)	17,088		N/A	N/A	Community Impact

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Boys and Girls Club of Greater Lawrence 136 Water Street Lawrence, MA 01841	04-2104377	501(c)(3)	17,000		N/A	N/A	Community Impact
Boys and Girls Club of Lower Merrimack Valley 18 Maple St PO Box 5906 Salisbury, MA 01952	04-3474114	501(c)(3)	17,000		N/A	N/A	Community Impact



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Fair Tide Inc 15 State Road Kittery, ME 03904	01-0525140	501(c)(3)	16,757		N/A	N/A	Community Impact
Homeless Center for Strafford County 9 Islinglass Dr Rochester, NH 03839	02-0519859	501(c)(3)	16,648		N/A	N/A	Community Impact

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New Generation Inc PO Box 676 Greenland, NH 03840	02-0409655	501(c)(3)	16,570		N/A	N/A	Community Impact
Providence College Harkins Hall 403 Providence, RI 01610	05-0258932	501(c)(3)	16,554		N/A	N/A	Community Impact

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My Friend's Place 368 Washington Street Dover, NH 03820	02-0407497	501(c)(3)	16,526		N/A	N/A	Community Impact
University of Massachusetts Amherst 181 Presidents Drive Amherst, MA 01003	54-2084125	501(c)(3)	16,493		N/A	N/A	Community Impact

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LEAP for Education Inc 35 Congress Street Suite 102 Salem, MA 01970	47-1445061	501(c)(3)	16,421		N/A	N/A	Community Impact
Breakthrough Greater Boston P O Box 381486 Cambridge, MA 02138	04-3307783	501(c)(3)	16,297		N/A	N/A	Community Impact

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St Francis House 39 Boylston St Essex Station Boston, MA 02116	22-2519129	501(c)(3)	15,437		N/A	N/A	Community Impact
Community Art Center Inc 119 Windsor St Cambridge, MA 02139	04-2496097	501(c)(3)	15,220		N/A	N/A	Community Impact

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Girl Scouts of Eastern MA 95 Berkeley St Boston, MA 02116	04-2703281	501(c)(3)	15,207		N/A	N/A	Community Impact
Philanthropy Massachusetts 133 Federal Sreet Suite 802 Boston, MA 02210	04-2457605	501(c)(3)	30,000		N/A	N/A	Community Impact

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Children's International Summer Village 15 Mt Vernon Street Apt 7 Cambridge, MA 02140	31-0616471	501(c)(3)	14,363		N/A	N/A	Community Impact
Seacoast Family Promise (Seacoast Interfaith Hospitality) 27 Hampton Road Exeter, NH 03885	02-0529881	501(c)(3)	14,346		N/A	N/A	Community Impact

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Paul Center for Learning and Recreation 39 Concord Road Chelmsford, MA 01824	04-2443266	501(c)(3)	14,311		N/A	N/A	Community Impact
St Ann's Home Inc 100 A Haverhill St Methuen, MA 01844	04-2104866	501(c)(3)	14,292		N/A	N/A	Community Impact



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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Associates for Human Services 68 Allison Avenue Tauton, MA 02780	04-2556164	501(c)(3)	14,257		N/A	N/A	Community Impact
Boston Chinese Evangelical Church 249 Harrison Ave Boston, MA 02111	51-0199982	501(c)(3)	14,155		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Developmental Evaluation & Adjustment Facilities Inc (DEAF) 215 Brighton Avenue Allston, MA 02134	04-2628350	501(c)(3)	14,139		N/A	N/A	Community Impact
Community Visiting Nurse 10 Emory Street Attleboro, MA 02703	04-2475924	501(c)(3)	14,000		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Cradles to Crayons 155 North Beacon St Brighton, MA 02135	04-3584367	501(c)(3)	13,921		N/A	N/A	Community Impact
UW of Rhode Island 50 Valley St Providence, RI 02909	05-0276059	501(c)(3)	13,869		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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United Way of Pioneer Valley 1441 Main Street Springfield, MA 01103	04-2152680	501(c)(3)	13,695		N/A	N/A	Community Impact
HAVEN VIOLENCE PREVENTION & SUPPORT SRVCS 20 International Drive Suite 300 Portsmouth, NH 03801	02-0337620	501(c)(3)	13,500		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Attleboro Area Council of Churches 95 Pine Street Attleboro, MA 02703	04-2301039	501(c)(3)	13,063		N/A	N/A	Community Impact
UW Acton-Boxborough 537 Massachusetts Ave 101 Acton, MA 01720	04-2740795	501(c)(3)	12,722		N/A	N/A	Community Impact

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YWCA of Greater Lowell 97 Central St Ste 302 Lowell, MA 01852	04-2105876	501(c)(3)	12,639		N/A	N/A	Community Impact
Massachusetts Afterschool Partnership 128A Tremont St Ste 4F Boston, MA 02108	20-5116880	501(c)(3)	12,500		N/A	N/A	Community Impact

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Massachusetts Budget and Policy Center Inc 15 Court Street Boston, MA 02108	04-2967537	501(c)(3)	12,500		N/A	N/A	Community Impact
Child Development Council Inc PO Box 337 Kingston, NH 03848	23-7173500	501(c)(3)	12,000		N/A	N/A	Community Impact

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UW of Heart of Florida 1940 Traylor Blvd Orlando, FL 32804	59-0808854	501(c)(3)	11,927		N/A	N/A	Community Impact
UW of Greater Fall River 30 Bedford St Fall River, MA 02720	04-2104026	501(c)(3)	11,764		N/A	N/A	Community Impact



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Planned Parenthood League of Massachusetts Inc 1055 Commonwealth Ave Boston, MA 02215	04-2698497	501(c)(3)	11,739		N/A	N/A	Community Impact
Boston Medical Center 801 Massachusetts Ave First Fl Boston, MA 02118	04-3314093	501(c)(3)	11,185		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Courageous Sailing 197 8th Street Charlestown, MA 02129	04-2987534	501(c)(3)	11,147		N/A	N/A	Community Impact
Housing Action NH co NeighborWorks Southern NH PO Box 3968 Manchester, NH 03105	36-4194807	501(c)(3)	11,021		N/A	N/A	Community Impact

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Healing Abuse Working for Change 27 Congress St Salem, MA 01970	04-2655367	501(c)(3)	10,999		N/A	N/A	Community Impact
American Cancer Society - New England Division 30 Speen St Framingham, MA 01701	13-1788491	501(c)(3)	10,956		N/A	N/A	Community Impact

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Tauton Emergency Task Force Inc 30 Olney Street Tauton, MA 02780	04-2833221	501(c)(3)	10,800		N/A	N/A	Community Impact
STARS 200 Middle St East Weymouth, MA 02189	23-7097840	501(c)(3)	10,589		N/A	N/A	Community Impact

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Cross Roads House Inc 600 Lafayette Road Portsmouth, NH 03801	22-2549963	501(c)(3)	10,585		N/A	N/A	Community Impact
Franklin Food Pantry PO Box 116 Franklin, MA 02038	04-3272663	501(c)(3)	10,518		N/A	N/A	Community Impact

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Children's Investment Fund 18 Tremont Street - Suite 500 Boston, MA 02108	04-3105358	501(c)(3)	10,416		N/A	N/A	Community Impact
Homes for Families 14 Beacon St Ste 615 Boston, MA 02108	04-3351172	501(c)(3)	10,386		N/A	N/A	Community Impact

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Jeremiah Program Boston 130 Warren Street Roxbury, MA 02119	41-1801834	501(c)(3)	10,250		N/A	N/A	Community Impact
American India Foundation 216 East 45th St 7th Fl New York, NY 10017	13-4159765	501(c)(3)	10,123		N/A	N/A	Community Impact

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Youth EmpowerHouse 7 William Street Haverhill, MA 01830	04-2104286	501(c)(3)	10,105		N/A	N/A	Community Impact
Boston Medical Center co Children's Health Watch Vose Hall - 4th Floor Boston, MA 02118	04-3314093	501(c)(3)	10,000		N/A	N/A	Community Impact



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Cambodian Mutual Assistance Assoc of Greater Lowell 465 School Street Lowell, MA 01851	22-2553560	501(c)(3)	10,000		N/A	N/A	Community Impact
Global Communities of Support 475 Wall St Princeton, NJ 08540	65-1149772	501(c)(3)	10,000		N/A	N/A	Community Impact

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Higher Ground 384 Warren Street 3rd Fl Roxbury, MA 02119	27-3660369	501(c)(3)	10,000		N/A	N/A	Community Impact
Marjorie B Cohen Foundation 49 Downing Lane Voorhees, NJ 08043	36-4448580	501(c)(3)	10,000		N/A	N/A	Community Impact

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Massachusetts Wonder Fund 600 Washington Street - 6th Floor Boston, MA 02111	04-3443890	501(c)(3)	10,000		N/A	N/A	Community Impact
New American Association of MA 330 Lynnway - Suite 302 Lynn, MA 01901	04-3102943	501(c)(3)	10,000		N/A	N/A	Community Impact

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Sunrise County Economic Council 7 Ames Way Machias, ME 04654	01-0493897	501(c)(3)	10,000		N/A	N/A	Community Impact
Jewish Community Relations Council 126 High Street Boston, MA 02110	04-2104347	501(c)(3)	10,000		N/A	N/A	Community Impact

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New Hampshire Legal Assistance 117 North State Street Concord, NH 03301	02-0300897	501(c)(3)	10,000		N/A	N/A	Community Impact
Somersworth Early Learning Center 35 Bartlett Avenue Somersworth, NH 03878	30-0247901	501(c)(3)	10,000		N/A	N/A	Community Impact

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The Midas Collaborative 18R Sheppard St 100 Brighton, MA 02135	83-0485169	501(c)(3)	10,000		N/A	N/A	Community Impact
The Upper Room A Family Resource Center PO Box 1017 36 Tsienneto Road Derry, NH 03038	02-0400769	501(c)(3)	10,000		N/A	N/A	Community Impact

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Greater Lowell Family YMCA 35 YMCA Dr Lowell, MA 01852	04-2104398	501(c)(3)	9,981		N/A	N/A	Community Impact
Vietnamese American Thang Long 1365 Dorchester Avenue Dorchester, MA 02122	46-0667169	501(c)(3)	9,920		N/A	N/A	Community Impact

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Center for Teen Empowerment 384 Warren St 3 Roxbury, MA 02119	04-3091002	501(c)(3)	9,897		N/A	N/A	Community Impact
Horizons Initiative 1705 Columbus Avenue Boston, MA 02119	22-2915188	501(c)(3)	9,878		N/A	N/A	Community Impact



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Salvation Army - Boston 25 Shawmut Rd Canton, MA 02021	04-2103624	501(c)(3)	9,869		N/A	N/A	Community Impact
Redemption Hill Church PO Box 482 Medford, MA 02155	90-0578808	501(c)(3)	9,800		N/A	N/A	Community Impact

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Boston Preparatory Public Charter School 885 River Street Boston, MA 02136	11-3690799	501(c)(3)	9,600		N/A	N/A	Community Impact
Aids Action Committee of Massachusetts Inc 75 Amory St Boston, MA 02119	22-2707246	501(c)(3)	9,435		N/A	N/A	Community Impact

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DOVE Inc (Domestic Violence Ended) PO Box 690267 Quincy, MA 02269	04-2667808	501(c)(3)	9,374		N/A	N/A	Community Impact
Women's Bar Foundation 105 Chaucy Street - Susite 800 Boston, MA 02111	04-2738850	501(c)(3)	9,339		N/A	N/A	Community Impact

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Children's Advocacy Center of Bristol County 58 Arch Street Fall river, MA 02724	04-3135548	501(c)(3)	9,273		N/A	N/A	Community Impact
Seacoast Community School 100 Campus Drive Ste 20 Portsmouth, NH 03801	02-0273466	501(c)(3)	9,252		N/A	N/A	Community Impact

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Alzheimer's Association of Massachusetts 309 Waverly Oaks Rd Waltham, MA 02452	04-2731194	501(c)(3)	9,094		N/A	N/A	Community Impact
Boys and Girls Club of Greater Billerica 19 Campbell Road Billerica, MA 01821	23-7106468	501(c)(3)	9,000		N/A	N/A	Community Impact

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Dover Day Care Learning Center 43 Back River Rd Dover, NH 03820	02-0303815	501(c)(3)	9,000		N/A	N/A	Community Impact
Project LEARN 8 Kirk Street Lowell, MA 01852	46-4885366	501(c)(3)	9,000		N/A	N/A	Community Impact

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Wellesley Scholarship Foundation PO Box 81207 Wellesley Hills, MA 02481	04-2392419	501(c)(3)	8,909		N/A	N/A	Community Impact
Northeastern University 360 Huntington Ave Boston, MA 02115	04-1679980	501(c)(3)	8,852		N/A	N/A	Community Impact

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Framingham State University 100 State Street 5th Floor Framingham, MA 01701	04-6002284	501(c)(3)	8,750		N/A	N/A	Community Impact
Our Daily Bread Soup Kitchen (Taunton) 111 High St Taunton, MA 02780	46-2234342	501(c)(3)	8,736		N/A	N/A	Community Impact



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Catholic Schools Foundation Inc 67 Batterymarch St Suite 600 Boston, MA 02110	22-2485502	501(c)(3)	8,725		N/A	N/A	Community Impact
UW of Central Massachusetts Denholm Bldg 484 Main St Ste 300 Worcester, MA 01608	04-2104017	501(c)(3)	8,721		N/A	N/A	Community Impact

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San Miguel School 525 Branch Ave Providence, RI 02904	22-3232973	501(c)(3)	8,430		N/A	N/A	Community Impact
University of Rhode Island Foundation 79 Upper College Rd Kingston, RI 02881	05-6014351	501(c)(3)	8,430		N/A	N/A	Community Impact

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Attleboro Area School to Career Partnership Inc P O Box 2634 Attleboro, MA 02703	04-3513745	501(c)(3)	8,400		N/A	N/A	Community Impact
Beverly Bootstraps 35 Park St Beverly, MA 01915	04-3254507	501(c)(3)	8,350		N/A	N/A	Community Impact

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Rosie's Place 889 Harrison Ave Roxbury, MA 02118	04-2582187	501(c)(3)	8,248		N/A	N/A	Community Impact
Child and Family Services of New Hampshire 464 Chestnut St Manchester, NH 03101	02-0222164	501(c)(3)	8,171		N/A	N/A	Community Impact

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Lowell Community Health Center 161 Jackson St Lowell, MA 01852	04-2881348	501(c)(3)	8,126		N/A	N/A	Community Impact
Community Partners 113 Crosby Road Suite 1 Dover, NH 03820	25-1918334	501(c)(3)	8,074		N/A	N/A	Community Impact

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Boys & Girls Club - Charlestown 200 High Street Suite 3B Boston, MA 02110	04-2103922	501(c)(3)	8,048		N/A	N/A	Community Impact
CRU 100 Lake Hart Drive Orlando, FL 32832	95-6006173	501(c)(3)	7,941		N/A	N/A	Community Impact

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YMCA West Roxbury Roslindale 1980 Centre Street West Roxbury, MA 02132	04-2103551	501(c)(3)	7,778		N/A	N/A	Community Impact
Weymouth Food Pantry 1189 Commercial St East Weymouth, MA 02189	04-3099272	501(c)(3)	7,772		N/A	N/A	Community Impact

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston University Community Service Center 775 Commonwealth Ave 4th Fl Boston, MA 02215	04-2103547	501(c)(3)	7,689		N/A	N/A	Community Impact
Essex County Community Foundation Inc 175 Andover St Suite 101 Danvers, MA 01923	04-3407816	501(c)(3)	7,688		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Richie McFarland Children's Center 11 Sandy Point Rd Stratham, NH 03885	02-0302005	501(c)(3)	7,637		N/A	N/A	Community Impact
Triumph Inc 100 Hon Gordon Owen Riverway Taunton, MA 02780	04-2394012	501(c)(3)	7,562		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Haven Project The Haven Project Lynn, MA 01901	45-3797693	501(c)(3)	7,480		N/A	N/A	Community Impact
United Way WorldWide P O Box 418607 Boston, MA 02241	13-1635294	501(c)(3)	7,446		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
First Teacher Boston 221 Blue Hill Avenue Roxbury, MA 02119	04-2261109	501(c)(3)	7,117		N/A	N/A	Community Impact
Brigham & Women's Hospital - Development Office 116 Huntington Avenue 3rd Floor Boston, MA 02116	04-2312909	501(c)(3)	7,076		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dedham Country Day School 90 Sandy Valley Rd Dedham, MA 02026	04-2106704	501(c)(3)	7,000		N/A	N/A	Community Impact
Newman YMCA 472 Tauton Avenue Seekonk, MA 02771	05-0258878	501(c)(3)	7,000		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Servings Roxbury MA 18 Marbury Terrace Jamaica Plain, MA 02130	22-3154028	501(c)(3)	6,979		N/A	N/A	Community Impact
Fenway Community Health Center 1340 Boylston Street Boston, MA 02215	04-2510564	501(c)(3)	6,953		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MetroWest YMCA 280 Old Connecticut Path Framingham, MA 01701	04-2281530	501(c)(3)	6,911		N/A	N/A	Community Impact
Jewish Community Housing for the Elderly 30 Wallingford Rd Brighton, MA 02135	04-2478888	501(c)(3)	6,867		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Agassiz Village 238 Bedford Street Suite 8 Lexington, MA 02420	04-2160531	501(c)(3)	6,792		N/A	N/A	Community Impact
Cambridge Community Foundation 99 Bishop Allen Drive Cambridge, MA 02139	04-6012492	501(c)(3)	6,597		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GATHER 210 West Rd Portsmouth, NH 03801	02-0226943	501(c)(3)	6,584		N/A	N/A	Community Impact
Jeanne Geiger Crisis Center Inc 2 Harris Street Newburyport, MA 01950	22-2474823	501(c)(3)	6,525		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bethany Hill School 89 Bethany Rd Framingham, MA 01702	04-2493492	501(c)(3)	6,471		N/A	N/A	Community Impact
UW of Greater Houston 50 Waugh Dr Houston, TX 77007	74-1167964	501(c)(3)	6,384		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Foundation for Boston Ctrs for Youth & Families 1483 Tremont Street Boston, MA 02120	04-2602576	501(c)(3)	6,168		N/A	N/A	Community Impact
BUILD Greater Boston 745 Atlantic Ave Boston, MA 02111	94-3386695	501(c)(3)	6,087		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Massachusetts General Hospital 100 Cambridge St Ste 1310 Boston, MA 02114	04-1564655	501(c)(3)	6,065		N/A	N/A	Community Impact
Boston Children's Hospital - Family Connections 300 Longwood Avenue Boston, MA 02115	04-2774441	501(c)(3)	6,041		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VNA Care Network - Danvers 199 Rosewood Drive Suite 180 Danvers, MA 01923	04-2105800	501(c)(3)	6,038		N/A	N/A	Community Impact
Salem State University 352 Lafayette Street Salem, MA 01970	04-2620632	501(c)(3)	5,995		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Epping School District 213 Main Street Epping, NH 03042	99-9999999	501(c)(3)	5,700		N/A	N/A	Community Impact
The Cancer Couch Foundation PO Box 1145 Southeastport, CT 06890	81-1529788	501(c)(3)	5,594		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAYPOINT 464 Chestnut Street Manchester, NH 03105	02-0222164	501(c)(3)	5,568		N/A	N/A	Community Impact
St Mary's Center for Women and Children's - MA 90 Cushing Ave Dorchester, MA 02125	04-3201844	501(c)(3)	5,553		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Michael Lisnow Carter Respite Center MA 112 Main St Hopkinton, MA 01748	04-3237284	501(c)(3)	5,472		N/A	N/A	Community Impact
Boys & Girls Club of Woburn 1 Charles Gardner Lane Woburn, MA 01801	04-2301953	501(c)(3)	5,440		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Clark University 950 Main Street Worcester, MA 01610	04-2111203	501(c)(3)	5,428		N/A	N/A	Community Impact
The Boston Foundation 75 Arlington St Fl 10 Boston, MA 02116	04-2104021	501(c)(3)	5,416		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UW of Greater Nashua 20 BRd St Nashua, NH 03064	02-6015642	501(c)(3)	5,395		N/A	N/A	Community Impact
Massachusetts Society for the Prevention of Cruelty to Animals 350 South Huntington Avenue Boston, MA 02130	04-2103597	501(c)(3)	5,333		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
South Shore ARC 371 River St North Weymouth, MA 02191	04-2302069	501(c)(3)	5,313		N/A	N/A	Community Impact
Catholic Charities South 169 Court Street Brockton, MA 02302	04-2534041	501(c)(3)	5,290		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
South Shore Health & Educational Foundation 55 Fogg Road Weymouth, MA 02190	04-2105926	501(c)(3)	5,256		N/A	N/A	Community Impact
Fire Escape Ministries Inc 122 Pacific Street Rockland, MA 02370	04-2761849	501(c)(3)	5,232		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Junior Achievement of Northern New England 209 Burlington Sroad - Suite 211 Bedford, MA 01730	04-2127020	501(c)(3)	5,181		N/A	N/A	Community Impact
Epilepsy Foundation of America 8301 Professional Place Landover, MD 20785	52-0856660	501(c)(3)	5,168		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Peace First 25 Kingston Street 6th Fl Boston, MA 02111	04-3323467	501(c)(3)	5,147		N/A	N/A	Community Impact
Crittenton Women's Union One Washington Mall 2nd floor Boston, MA 02108	04-2104046	501(c)(3)	5,058		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Society of St Vincent de Paul St John Parish 22 Wellesley Road Beverly, MA 01915	04-2104826	501(c)(3)	5,034		N/A	N/A	Community Impact
Massachusetts Housing and Shelter Alliance PO Box 8638 Boston, MA 02114	22-3068653	501(c)(3)	5,019		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Charlotte Ballet 701 North Tryon St Chalotte, NC 28202	58-1314711	501(c)(3)	5,000		N/A	N/A	Community Impact
Crossroads Rhode Island 160 BRd St Providence, RI 02903	05-0259094	501(c)(3)	5,000		N/A	N/A	Community Impact

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Family Aid Boston 727 Atlantic Ave Boston, MA 02111	04-2105756	501(c)(3)	5,000		N/A	N/A	Community Impact
Merrimack Repertory Theatre 132 Warren Street Lowell, MA 01852	04-2664784	501(c)(3)	5,000		N/A	N/A	Community Impact



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Salvation Army of Greater Charlotte 4335 Stuart Andrew Blvd Ste 120 Charlotte, NC 28217	05-8660607	501(c)(3)	5,000		N/A	N/A	Community Impact

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**  
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization  
UNITED WAY OF MASSACHUSETTS BAY INC

Employer identification number  
04-2382233

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </div> <div> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </div> </div>		
<b>b</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.	<b>1b</b>	
<b>2</b> 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?	<b>2</b>	
<b>3</b> 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 style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Compensation committee  <input checked="" type="checkbox"/> Independent compensation consultant  <input checked="" type="checkbox"/> Form 990 of other organizations                 </div> <div> <input checked="" type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </div> </div>		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <div style="margin-left: 20px;"> <b>a</b> Receive a severance payment or change-of-control payment?  <b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?  <b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?                 </div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	<b>4a</b> <b>4b</b> <b>4c</b>	   No No No
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div style="margin-left: 20px;"> <b>a</b> The organization?  <b>b</b> Any related organization?                 </div> If "Yes," on line 5a or 5b, describe in Part III.	<b>5a</b> <b>5b</b>	 No No
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div style="margin-left: 20px;"> <b>a</b> The organization?  <b>b</b> Any related organization?                 </div> If "Yes," on line 6a or 6b, describe in Part III.	<b>6a</b> <b>6b</b>	 No No
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	<b>7</b>	No
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	<b>8</b>	No
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>	

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

**Note.** The sum of columns (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.

See Additional Data Table

**Schedule J (Form 990) 2018**

**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 3	UWMB'S Executive Committee of the Board of Directors reviews and approves all Executive Compensation, as recommended by UWMB's Compensation Committee



Additional Data

Software ID: 18007697  
Software Version: 2018v3.1  
EIN: 04-2382233  
Name: UNITED WAY OF MASSACHUSETTS BAY INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(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 in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Michael K Durkin President and CEO	(i)	326,122	19,034	28,518	35,000	23,133	431,807	0
	(ii)	0	0	0	0	0	0	0
Richard Voccio Chief Administrative Officer, Assistant Board Treasurer	(i)	182,355	18,000	655	21,030	22,495	244,535	0
	(ii)	0	0	0	0	0	0	0
Patricia Latimore Chief Operations Officer	(i)	199,913	9,500	19,890	19,020	22,932	271,255	0
	(ii)	0	0	0	0	0	0	0
Lisa Rowan-Gillis Chief Development Officer	(i)	241,887	15,000	1,568	21,272	22,636	302,363	0
	(ii)	0	0	0	0	0	0	0
Karley Ausiello SVP Community Impact	(i)	155,173	0	206	16,460	22,579	194,418	0
	(ii)	0	0	0	0	0	0	0
Mark Lamothe SVP Marketing	(i)	167,732	10,200	623	11,112	22,485	212,152	0
	(ii)	0	0	0	0	0	0	0
Jane Grady VP Human Resources & Ethics	(i)	135,896	2,500	719	14,273	9,304	162,692	0
	(ii)	0	0	0	0	0	0	0
Joseph Sousa VP Corporate Relations	(i)	135,686	0	262	14,451	22,508	172,907	0
	(ii)	0	0	0	0	0	0	0
Brigid Boyd VP Communications/Public Relations	(i)	133,568	5,000	150	14,056	22,431	175,205	0
	(ii)	0	0	0	0	0	0	0
Janet Collins VP Individual Giving	(i)	124,572	0	438	13,452	22,334	160,796	0
	(ii)	0	0	0	0	0	0	0

Schedule L

(Form 990 or 990-EZ)

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

UNITED WAY OF MASSACHUSETTS BAY INC

Employer identification number

04-2382233

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						▶ \$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) BLUE CROSS BLUE SHIELD OF MASSACHUSETTS	KEY EMPLOYEE OF BCBS IS ALSO A DIRECTOR	1,198,343	HEALTH AND DENTAL BENEFITS FOR UWMB EMPLOYEES		No

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
Schedule L, Part IV PART IV	SEVERAL OTHER BOARD DIRECTORS ARE KEY EMPLOYEES OF ENTITIES THAT PROVIDE GOODS/SERVICES TO UWMB IN THE NORMAL COURSE OF BUSINESS BUT FEES PAID FOR THOSE SERVICES ARE BELOW THE DOLLAR TRESHOLD FOR REPORTING IN SCHEDULE L IN ADDITION, THOSE INDIVIDUALS ARE NOT INVOLVED WITH THE MANAGEMENT OF EACH ACCOUNT



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.  
►Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
UNITED WAY OF MASSACHUSETTS BAY INC

Employer identification number  
04-2382233

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 . . . . .	X		16,375	Market value
5 Clothing and household goods . . . . .	X		305,744	Market value
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .	X	61	417,662	Market value
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 . . . . .	X	2	18,997	NONE
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

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 nonstandard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

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 - Miscellaneous - Number of contributions Clothing and household goods - Number of Contributions Books and publications - Number of Contributions Food inventory - Number of Contributions

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -	DLN: 93493044006210
<b>SCHEDULE O</b> (Form 990 or 990-EZ)	<b>Supplemental Information to Form 990 or 990-EZ</b> Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information.		OMB No 1545-0047
			<b>2018</b>
Department of the Treasury			<b>Open to Public Inspection</b>
Name of the organization UNITED WAY OF MASSACHUSETTS BAY INC		Employer identification number  04-2382233	

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 1 PART III	<p>INTRODUCTION FOR OVER 70 YEARS, UWMB HAS BROUGHT THE COMMUNITY TOGETHER TO HELP IMPROVE PEOPLE'S LIVES AND STRENGTHEN THE COMMUNITIES IT SERVES. WE BELIEVE THAT FAMILIES ARE SOCIETY'S GREATEST ASSET AND THAT BY BRINGING THE COMMUNITY TOGETHER TO HELP EACH FAMILY REACH THEIR FULL POTENTIAL WE LAY THE FOUNDATION FOR A STRONG, STABLE REGION AND ROBUST ECONOMY THAT BENEFITS EVERYONE. OUR FOUNDING BELIEF-THAT TOGETHER WE CAN DO MORE THAN WE EVER COULD ALONE-STILL DEFINES OUR MISSION, BUT TODAY THAT BELIEF HAS STRETCHED BEYOND FUNDRAISING AND CREATED A POWERFUL AND GROWING MOVEMENT TO GIVE, ADVOCATE OR VOLUNTEER. OUR RALLYING CRY, TO "LIVE UNITED" HAS MOBILIZED THE COMMUNITIES WE SERVE TO ADVANCE THE COMMON GOOD SO WE CAN PROVIDE NEEDED HELP TODAY AND CREATE A STRONGER TOMORROW. WE ALL WANT TO HAVE THE GREATEST POSSIBLE IMPACT ON OUR COMMUNITY AND THE ISSUES THAT WE CARE ABOUT. UWMB LEVERAGES THE RESOURCES AND TALENTS OF A REGIONAL NETWORK OF MORE THAN 190 PARTNER AGENCIES TO FOCUS ON SHARED GOALS, USING PROVEN STRATEGIES ACROSS OUR THREE IMPACT AREAS; THESE AGENCIES CREATE A CONTINUUM OF SUPPORT FOR CHILDREN, YOUTH AND THEIR FAMILIES THAT EXTENDS WELL BEYOND THE REACH OF ANY SINGLE ORGANIZATION. NO OTHER ORGANIZATION HAS THE SCOPE, EXPERTISE, OR INFLUENCE TO BRING TOGETHER HUNDREDS OF HUMAN SERVICE AGENCIES, GOVERNMENT, BUSINESSES, PRIVATE FOUNDATIONS AND DEDICATED VOLUNTEERS AROUND A COMMON VISION OF CREATING MAXIMUM IMPACT AND ACHIEVING LONG-LASTING RESULTS.</p> <p>ORGANIZATIONAL OVERVIEW UWMB ENCOMPASSES OVER 150 CITIES AND TOWNS WITH NET ASSETS OF MORE THAN \$53 MILLION. AS A MORE NIMBLE ORGANIZATION WITH STREAMLINED, CENTRALIZED BACKROOM SERVICES, WE CAN FOCUS OUR RESOURCES ON ACHIEVING GREATER IMPACT ON THE ISSUES AFFECTING FAMILIES ON A MUCH BROADER SCALE. UWMB IS A COMMUNITY IMPACT ORGANIZATION WITH FOUR DISTINCT FUNCTIONAL DIVISIONS: COMMUNITY IMPACT, DEVELOPMENT, MARKETING/COMMUNICATIONS AND FINANCE/ADMINISTRATION. UWMB STAFF EXPERTS HAVE PARTICIPATED ON NUMEROUS SIGNIFICANT CITY AND STATEWIDE TASK FORCES AND COMMUNITY BOARDS AND COMMITTEES THAT HAVE DIRECT INFLUENCE ON KEY ISSUES FACING OUR REGION. OUR PARTICIPATION IN THESE EFFORTS HELPS TO ENSURE THAT WE ARE TRULY SOLVING PROBLEMS RATHER THAN ADDRESSING SYMPTOMS. UWMB HAS ALWAYS BEEN COMMITTED TO ENSURING THAT EVERY DOLLAR ENTRUSTED TO US IS INVESTED TO PRODUCE THE GREATEST MEASURABLE IMPACT. IN 2007, THIS STRATEGY WAS FORMALIZED INTO A NEW MODEL OF INVESTMENT. ALL FUNDING OF PARTNER AGENCIES IS SUBJECT TO STRINGENT REPORTING REQUIREMENTS THAT ARE DIRECTLY LINKED TO THE ACHIEVEMENT OF SPECIFIC CONTRIBUTIONS. BY MEASURING RESULTS AND MAKING ACCOUNTABILITY A PRIORITY, UWMB IS ABLE TO HAVE A MORE SIGNIFICANT IMPACT ON THE ISSUES FACING OUR COMMUNITY. WE ALSO FOSTER GREATER COLLABORATION AND INNOVATION WHILE STREAMLINING EFFORTS AND CREATING MORE EFFECTIVE SERVICE MODELS. UWMB BRINGS TOGETHER SCHOOLS, COMMUNITY ORGANIZATIONS, GOVERNMENT AND BUSINESS LEADERS TO ENABLE CHANGE THAT WOULD NOT OTHERWISE.</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 1 PART III	<p>BE POSSIBLE FROM JOINING WITH THE CITY OF BOSTON TO PROMOTE HEALTHY EARLY CHILDHOOD DEVELOPMENT TO PARTNERING WITH THE FINANCIAL SERVICES INDUSTRY TO HELP LOW-INCOME FAMILIES IN LAWRENCE RECEIVE THEIR EARNED INCOME TAX CREDIT, TO PARTNERING WITH GREATER SEACOAST COMPANIES AROUND OUR K-READY KIDS EARLY LEARNING INITIATIVE, WE'RE UNITING PEOPLE AND INVESTING IN PROVEN APPROACHES THAT CREATE LASTING CHANGE STRATEGIC FOCUS TOGETHER, WE'RE HELPING TODAY AND STRENGTHENING TOMORROW BY FOCUSING ON THREE KEY COMMUNITY IMPACT AREAS THAT BUILD A BRIGHTER FUTURE FOR ALL</p> <p>1 HEALTHY CHILD DEVELOPMENT ENSURING CHILDREN ARE READY TO LEARN WHEN THEY ENTER SCHOOL</p> <p>2 INCREASING YOUTH OPPORTUNITIES KEEPING KIDS ENGAGED IN LEARNING SO THEY GRADUATE ABLE TO COMPETE</p> <p>3 FAMILY FINANCIAL STABILITY HELPING FAMILIES ACHIEVE FINANCIAL STABILITY</p> <p>CONCLUSION TODAY MORE THAN EVER, CHILDREN AND FAMILIES NEED OUR HELP WE SEE THIS NEED EVERY DAY THOUSANDS OF FAMILIES ARE REQUESTING ASSISTANCE WHO HAVE NEVER HAD TO ASK FOR HELP BEFORE WE ARE VERY PROUD OF THE THOUSANDS OF INDIVIDUALS, COMPANIES AND FOUNDATIONS WHOSE COLLECTIVE TALENTS AND CONTRIBUTIONS HAVE CREATED MEANINGFUL CHANGE THAT WILL IMPACT OUR COMMUNITIES FOR GENERATIONS TO COME</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 8,649,075 including grants of \$ 8,649,075)(Revenue \$ 233,874) DONORS TO THE CAMPAIGN MAY DESIGNATE ALL OR PART OF THEIR CONTRIBUTIONS TO SPECIFIC AGENCIES SUCH AMOUNTS ARE NOT INCLUDED AS ALLOCATIONS TO AGENCIES AND ARE RECORDED AS A DEDUCTION FROM DONOR CONTRIBUTIONS IN THE AUDITED FINANCIAL STATEMENT OF ACTIVITIES ALL DONOR DESIGNATIONS ARE VERIFIED FOR 501(C)(3) ELIGIBILITY AND COMPLIANCE WITH THE USA PATRIOT ACT

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 2,248,426 including grants of \$ 1,606,312) PROGRAM ADMINISTRATION INCLUDES UWMB'S INTERNAL RESOURCE ALLOCATION TO SUPPORT CHILDREN, YOUTH AND FAMILY PROGRAMS

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	INDEPENDENT CPA FIRM REVIEWS THE ANNUAL FORM 990 A DRAFT OF THE FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE FOR THEIR REVIEW AND DISCUSSION IN ADDITION, THE FINAL DRAFT IS SENT TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL PRIOR TO FILING



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	<p>UWMB's CODE OF ETHICS IS INTENDED TO GUIDE AND ADVANCE THE ETHICAL CONDUCT OF BOTH VOLUNTEERS AND STAFF IN CARRYING OUT THEIR UWMB's RESPONSIBILITIES AS PART OF THE CODE OF ETHICS, ALL VOLUNTEERS AND STAFF MUST AVOID ANY CONFLICT OF INTEREST, OR THE APPEARANCE OF A CONFLICT OF INTEREST, WHICH COULD TARNISH THE REPUTATION OF UWMB OR UNDERMINE THE PUBLIC'S TRUST IN UWMB STAFF AND VOLUNTEERS TO ENSURE THAT THE BEST INTERESTS OF UWMB ARE SERVED ALL VOLUNTEERS AND STAFF UPON FIRST BEING ELECTED, APPOINTED, HIRED OR ASSIGNED, DISCLOSES IN WRITING, TO THE BEST OF HIS OR HER KNOWLEDGE, ANY POTENTIAL BUSINESS OR AGENCY CONFLICTS OF INTERESTS THAT INVOLVE THE INDIVIDUAL, HIS OR HER IMMEDIATE RELATIVES, OR ANY ENTITY WITH WHICH HE OR SHE IS ASSOCIATED IN A SIGNIFICANT LEADERSHIP OR OWNERSHIP CAPACITY THEREAFTER, THESE DISCLOSURES ARE UPDATED ANNUALLY, OR SOONER IF CHANGED CIRCUMSTANCES IN A PARTICULAR CASE MAY WARRANT THE TERMS OF ALL POTENTIAL CONFLICTS OF INTEREST ARE REVIEWED BY MANAGEMENT AND REPORTED TO UWMB's AUDIT COMMITTEE ON AN ANNUAL BASIS THE COMMITTEE DEVELOPS RECOMMENDATIONS AS TO WHETHER, ALL FACTORS CONSIDERED, A POTENTIAL CONFLICT IS FAIR AND REASONABLE AND IN THE BEST INTEREST OF UWMB AND PROVIDES THESE RECOMMENDATIONS TO UWMB'S BOARD FOR APPROVAL</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	<p>Each year, the Compensation Committee, which is comprised of Board and non-Board members, reviews compensation, benchmarks and performance metrics for the top five positions in the leadership of the organization including the President and Chief Executive Officer. Every three years, the Compensation Committee also completes a review of the external compensation market by engaging an executive compensation consultant to review the compensation and benefits package and set benchmarks for each position. All compensation changes are reviewed and approved each year by the Board of Directors following review and approvals by the Compensation Committee and the Executive Committee of the Board and documented in the meeting minutes. The Chairperson of the Compensation Committee who is also a member of the Board of Directors creates and maintains the documentation of the deliberations of the Committee meetings and decisions regarding the compensation decisions.</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	SEE PART VI, LINE 15A

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	UWMB, UPON REQUEST, WILL PROVIDE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS UWMB'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION AT THE MASSACHUSETTS ATTORNEY GENERAL'S OFFICE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Merger with the United Way of Greater Attleboro Taunton (UWGAT) November 1, 2018 - 1943187,