

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)

OMB No 1545-0047

2015

Open to Public Inspection

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

A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

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

C Name of organization
United Way of Greater Cincinnati

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
2400 Reading Road

City or town, state or province, country, and ZIP or foreign postal code
Cincinnati, OH 45202

D Employer identification number
31-0537502

E Telephone number
(513) 762-7100

G Gross receipts \$ 317,148,748

F Name and address of principal officer
Robert C Reifsnnyder
2400 Reading Road
Cincinnati, OH 45202

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 ▶

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

J Website: ▶ www.uwgc.org

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1920 **M** State of legal domicile OH

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities UNITED WAY LEADS AND MOBILIZES THE CARING POWER OF INDIVIDUALS AND ORGANIZATIONS TO HELP PEOPLE MEASURABLY IMPROVE THEIR LIVES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	62
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	58
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	171
	6 Total number of volunteers (estimate if necessary)	6	21,324
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	62,750,144	61,677,581
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,368,929	1,361,162
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	852,504	874,918
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	129,483	157,155
		65,101,060	64,070,816
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	47,705,412	44,362,298
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,459,164	11,022,387
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,771,236		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,703,426	7,227,738
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	64,868,002	62,612,423	
19 Revenue less expenses Subtract line 18 from line 12	233,058	1,458,393	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	86,642,768	87,814,445
	21 Total liabilities (Part X, line 26)	50,468,134	49,195,683
22 Net assets or fund balances Subtract line 21 from line 20	36,174,634	38,618,762	

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: _____ Date: 2016-09-28

Yvonne Washington Executive Vice President / COO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Aaron Hershberger	Preparer's signature Aaron Hershberger	Date	Check <input type="checkbox"/> if self-employed	PTIN P00961884
Firm's name ▶ BKD LLP			Firm's EIN ▶ 44-0160260	
Firm's address ▶ 312 Walnut St Suite 3000 Cincinnati, OH 45202			Phone no (513) 621-8300	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
 UNITED WAY LEADS AND MOBILIZES THE CARING POWER OF INDIVIDUALS AND ORGANIZATIONS TO HELP PEOPLE MEASURABLY IMPROVE THEIR LIVES

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

4a (Code) (Expenses \$ 39,294,101 including grants of \$ 33,049,068) (Revenue \$)
 Community Impact Community Impact includes activities that relate to fund program investment and strategic community initiatives, including public policy and community services/labor Community Impact involves developing community solutions and investing resources to effectively address community goals and health and human service needs and includes outcome measurement, planning and problem-solving Strategic community initiatives promote collaborative problem solving and community development with governmental and nonprofit agencies, and education / income / health organizations UWGC's leadership is evident through the Agenda for Community Impact, a dynamic and interactive action plan designed to achieve measurable community change in priority areas around helping children achieve academic and life success and ensuring families and individuals achieve financial stability The Agenda guides all of UWGC's work and is closely linked to the Community's Bold Goals for our Region, which were first developed in 2011 Building on the framework of the Bold Goals, UWGC continues work in the community to ensure broad-cross sector coordination with the intent to create large scale social change Progress has been noted in the Bold Goals At the end of 2015, more than 250 businesses, educational institutions, hospitals and nonprofit entities had pledged to work collectively toward achievement of the goals Education UWGC places our highest priority on working with systems and partners to ensure that children arrive at kindergarten ready to learn and to make sure youth succeed For children to grow into successful adults, they need a supportive and healthy early foundation UWGC is investing heavily in two core research-based strategies proven to be effective in ensuring a strong start in life quality home visitation/parent support and quality early care and education Throughout the region, United Way Success By 6 is the driving force behind ensuring that families are receiving the services and support needed to help young children succeed As a result of this work and that of many committed social service providers, kindergarten readiness assessments over the last few years reflect progress in the number of children in our communities who are ready for the challenges of school Because youth spend 80 percent of their time in settings other than school, we cannot rely primarily on schools to provide educational and cultural experiences Children living in impoverished communities must have the same enrichment and learning opportunities as their counterparts in affluent neighborhoods UWGC and its partners are working to ensure youth success through a variety of programs and initiatives, including quality out of school time and cultural enrichment, in-school support, mentoring, mental health counseling, and risky behavior and child abuse prevention Results of this work in 2015 include Ensured 13,284 were prepared for kindergarten, 95 percent of children ages birth to 3 years participating in home visiting programs were developmentally on target, 90 percent of children participating in early care and education programs were assessed age-appropriate in their development, 96 percent of youth in academic-focused youth programs achieved grade promotion, 11,647 students participated two or more times per week in structured after-school activities, and, 94% of the youth in UW funded programs focusing on academic achievement graduated high school Income UWGC places our second highest priority on working with systems and partners to ensure that families and individuals are financially stable Financial stability is one of the key factors to building strong and stable families and, in turn, strong and stable communities Those who have fewer financial stresses are healthier, perform better at work and have better education outcomes When parents are financially stable, they are more able to address the physical, emotional and educational needs of their children To address the obstacles that prevent hard-working families from getting ahead financially, UWGC is investing in vital services and partnering with others to ensure that families meet their basic needs, while gaining the financial capability to plan for, and accomplish, their long-term financial goals In our region, we are seeing an increasing oversupply of entry-level workers and an undersupply of skilled workers with post-secondary education UWGC is taking a key leadership role in the community's efforts to ensure that workers in our region have the appropriate education and training to meet the demands of local employers Results of this work in 2015 include 2,564 individuals obtained jobs through UWGC-funded workforce programs, since 2009, 9,080 individuals have participated in Career Pathway Initiatives - 80% obtained jobs while 69% retained jobs for at least one year, 82,458 individuals received food that met their basic needs, 5,724 families and individuals received emergency shelter for at least three days, and \$23.7 million in tax credits were returned to more than 19,000 families who filed at United Way's 30+ sites region-wide Health Health cuts across the Education and Income goal areas of the Agenda for Community Impact - essentially extending across the entire lifespan Good health helps to ensure children are prepared for kindergarten and that they succeed during their school years Poor health can keep families from being financially stable The World Health Organization defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity Achieving and maintaining good health is important during all stages of life, from prenatal health through childhood to adulthood to later years in life The health of our citizens is a strong indicator of the health of our communities Whether it is a neighbor without health insurance, a senior in need of home health care, a victim of abuse, or someone struggling with mental illness or addiction, UWGC is working to ensure everyone has access to affordable and quality care so they can lead safe, healthy and rewarding lives Community Health Agenda - The Health Collaborative is leading an effort of key stakeholders in our region to develop a long-term, systematic plan to drive better health, better health care and lower costs for our community United Way is playing a supporting role in the development of this Agenda Cradle Cincinnati - A newly-formed partnership focusing on comprehensive, evidence-based strategies to reduce the infant mortality rate in Cincinnati and Hamilton County United Way is both an investor and on the leadership committee Results of this work in 2015 include 3,644 seniors received transportation services to and from medical appointments, 2,080 seniors received a nutritious meal, enabling them to continue living independently, 2,452 seniors at risk for abuse, neglect and exploitation participated in case management services, 7,225 individuals established a medical home and, 94 percent of children birth through age 5 were on track for receiving immunizations

4b (Code) (Expenses \$ 10,414,251 including grants of \$ 10,414,251) (Revenue \$)
 DONOR DESIGNATIONS AS PART OF THE UWGC CAMPAIGN, DONORS MAY DESIGNATE ALL OR A PORTION OF THEIR PLEDGE TO A UWGC INITIATIVE OR IMPACT AREA, A UWGC AGENCY PARTNER, OR ANOTHER UNITED WAY DESIGNATIONS RECEIVED IN THE FALL CAMPAIGN ARE DISTRIBUTED THE FOLLOWING YEAR BASED UPON AMOUNTS COLLECTED

4c (Code) (Expenses \$ 2,026,246 including grants of \$ 898,979) (Revenue \$ 1,334,862)
 CENTRAL SERVICES CENTRAL SERVICES INCLUDE SELF-SUPPORTING PROGRAMS WHICH SERVE UWGC'S OPERATING DIVISIONS AND OTHER NONPROFIT ORGANIZATIONS THESE FEE-PRODUCING PROGRAMS INCLUDE GROUP EMPLOYEE BENEFITS ADMINISTRATION, BUILDING AND GROUNDS MANAGEMENT, PRINTING, OFFICE SUPPLIES, MAIL, ACCOUNTING, AND MANAGEMENT INFORMATION SERVICES
 See Additional Data

4d Other program services (Describe in Schedule O)
 (Expenses \$ 1,681,586 including grants of \$) (Revenue \$ 26,300)

4e Total program service expenses \$ 53,416,184

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. 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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
	62		
1b	Enter the number of voting members included in line 1a, above, who are independent		
	58		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> IN, KY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, address, and telephone number of the person who possesses the organization's books and records <input checked="" type="checkbox"/> Jill Johnson 2400 Reading Road Cincinnati, OH 45202 (513) 762-7100

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

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

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

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

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

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

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

List all of the organization's **former** officers, key employees, 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

Table with 6 main columns: (A) Name and Title, (B) Average hours per week, (C) Position (with sub-columns for Individual trustee or director, Institutional Trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization (W-2/1099-MISC), (E) Reportable compensation from related organizations (W-2/1099-MISC), and (F) Estimated amount of other compensation from the organization and related organizations. The first row contains 'See Additional Data Table' and the rest are empty.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							1,575,862	0	256,227	

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 **▶ 9**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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>	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>		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
UPIC SOLUTIONS 2136 Chamber Center Drive FORT MITCHELL, KY 41017	TECHNOLOGY SERVICES	449,350
StratusLive LLC 6465 College Park Square Virginia Beach, VA 23464	Technology Services	176,582
UNIVERSITY OF CINCINNATI-IPR Two Edwards Center Suite 3300 CINCINNATI, OH 45221	RESEARCH SERVICES	150,000
Partnership Center Ltd 2134 Alpine Pl Cincinnati, OH 45206	Professional Services	139,094
CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER 3333 Burnet Avenue CINCINNATI, OH 45229	RESEARCH SERVICES	111,775

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 6**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a	158,766					
	b	Membership dues 1b	0					
	c	Fundraising events 1c	35,550					
	d	Related organizations 1d	939,300					
	e	Government grants (contributions) 1e	241,057					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	60,302,908					
	g	Noncash contributions included in lines 1a-1f \$	2,428,460					
	h	Total. Add lines 1a-1f	61,677,581					
Program Service Revenue			Business Code					
	2a	RENTAL INCOME FROM AGENCIES	531120	423,326	423,326	0	0	
	b	CENTRAL SERVICES-ACCOUNTING FEES	561499	131,600	131,600	0	0	
	c	CENTRAL SERVICES-ADMINISTRATIVE SERVICES	561000	165,036	165,036	0	0	
	d	CENTRAL SERVICES-CITY HUMAN SERVICES	900099	81,921	81,921	0	0	
	e	211 SERVICE FEES	561499	446,104	446,104	0	0	
	f	All other program service revenue		113,175	113,175	0	0	
	g	Total. Add lines 2a-2f		1,361,162				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1,029,078	0	0	1,029,078		
	4	Income from investment of tax-exempt bond proceeds	0	0	0	0		
	5	Royalties	0	0	0	0		
	6a	Gross rents	(i) Real	0	0	0	0	
			(ii) Personal	0	0	0	0	
			b	Less rental expenses	0	0	0	0
			c	Rental income or (loss)	0	0	0	0
	d	Net rental income or (loss)	0	0	0	0		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	252,902,375	0	0	0	
			(ii) Other	0	0	0	0	
			b	Less cost or other basis and sales expenses	253,056,535	0	0	0
			c	Gain or (loss)	-154,160	0	0	0
	d	Net gain or (loss)	-154,160	0	0	-154,160		
	8a	Gross income from fundraising events (not including \$ 35,550 of contributions reported on line 1c) See Part IV, line 18						
	a		30,207					
b	Less direct expenses b		21,397					
c	Net income or (loss) from fundraising events		8,810		0	8,810		
9a	Gross income from gaming activities See Part IV, line 19							
a		0						
b	Less direct expenses b		0					
c	Net income or (loss) from gaming activities		0	0	0	0		
10a	Gross sales of inventory, less returns and allowances							
a		0						
b	Less cost of goods sold b		0					
c	Net income or (loss) from sales of inventory		0	0	0	0		
Miscellaneous Revenue		Business Code						
11a	OUTSIDE DESIGNATION FEES	900099	144,341	0	0	144,341		
b	MISCELLANEOUS REVENUE	900099	4,004	0	0	4,004		
c								
d	All other revenue		0	0	0	0		
e	Total. Add lines 11a-11d		148,345					
12	Total revenue. See Instructions		64,070,816	1,361,162	0	1,032,073		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	44,362,298	44,362,298		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,092,856	268,918	394,763	429,175
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,878,930	3,448,723	1,312,425	2,117,782
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,912,079	945,509	392,776	573,794
9	Other employee benefits	554,151	291,480	100,418	162,253
10	Payroll taxes	584,371	284,165	116,964	183,242
11	Fees for services (non-employees)				
a	Management				
b	Legal	19,088		19,088	
c	Accounting	69,700		69,700	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	15,382		15,382	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,767,077	1,997,918	239,908	529,251
12	Advertising and promotion	339,613	260,483	10,089	69,041
13	Office expenses	472,487	1,860	164,442	306,185
14	Information technology	572,583	454,527	44,095	73,961
15	Royalties				
16	Occupancy	612,671	159,499	187,223	265,949
17	Travel	207,041	119,363	21,090	66,588
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	438,731	178,958	59,896	199,877
20	Interest	213,653	104,000	44,078	65,575
21	Payments to affiliates	526,986	256,537	108,717	161,732
22	Depreciation, depletion, and amortization	319,732	155,636	65,963	98,133
23	Insurance	169,922	24,422	15,446	130,054
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	ALLOCATION TO RED CROSS	284,600			284,600
b	OTHER DUES	183,374	86,790	42,540	54,044
c	MISCELLANEOUS EXPENSE	15,098	15,098		
d					
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	62,612,423	53,416,184	3,425,003	5,771,236
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	860	1	610
	2 Savings and temporary cash investments	2,464,947	2	3,326,457
	3 Pledges and grants receivable, net	47,834,020	3	46,325,192
	4 Accounts receivable, net	1,496,635	4	1,842,726
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			
			5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			
			6	0
	7 Notes and loans receivable, net	12,117,200	7	12,117,200
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	317,660	9	246,714
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a 1,606,825		
	b Less accumulated depreciation	10b 823,945	765,714	10c 782,880
	11 Investments—publicly traded securities	20,161,945	11	22,094,456
	12 Investments—other securities. See Part IV, line 11	0	12	
	13 Investments—program-related. See Part IV, line 11	0	13	
14 Intangible assets		14		
15 Other assets. See Part IV, line 11	1,483,787	15	1,078,210	
16 Total assets. Add lines 1 through 15 (must equal line 34)	86,642,768	16	87,814,445	
Liabilities	17 Accounts payable and accrued expenses	2,624,516	17	3,359,911
	18 Grants payable	42,690,030	18	41,535,638
	19 Deferred revenue		19	5,710
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	4,999,533	23	4,137,785
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	154,055	25	156,639
	26 Total liabilities. Add lines 17 through 25	50,468,134	26	49,195,683
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	26,684,391	27	27,437,826
	28 Temporarily restricted net assets	8,433,192	28	10,202,767
	29 Permanently restricted net assets	1,057,051	29	978,169
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	36,174,634	33	38,618,762	
34 Total liabilities and net assets/fund balances	86,642,768	34	87,814,445	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	64,070,816
2	Total expenses (must equal Part IX, column (A), line 25)	2	62,612,423
3	Revenue less expenses Subtract line 2 from line 1	3	1,458,393
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	36,174,634
5	Net unrealized gains (losses) on investments	5	-17,373
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,003,108
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	38,618,762

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID: 15000238
Software Version: 2015v2.1
EIN: 31-0537502
Name: United Way of Greater Cincinnati

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

(Code) (Expenses \$ 1,681,586 including grants of \$ 0) (Revenue \$ 26,300)

DIRECT SERVICES DIRECT SERVICES ARE SERVICES PROVIDED BY UWGC, SUCH AS UNITED WAY 211 AND THE VOLUNTEER CONNECTION UNITED WAY 211 LINKS PEOPLE TO SERVICES AND VOLUNTEER OPPORTUNITIES UNITED WAY 211 IS AVAILABLE 24 HOURS A DAY, SEVEN DAYS A WEEK TO PEOPLE IN HAMILTON, CLERMONT, BROWN AND BUTLER COUNTIES IN OHIO, BOONE, KENTON, CAMPBELL AND GRANT COUNTIES IN KENTUCKY, AND DEARBORN, OHIO, JEFFERSON, RIPLEY AND SWITZERLAND COUNTIES IN INDIANA THE VOLUNTEER CONNECTION STRIVES TO INCREASE THE EFFECTIVENESS AND PARTICIPATION OF ALL SEGMENTS OF VOLUNTEER RESOURCES THROUGH RECRUITMENT, TRAINING, EDUCATION AND RECOGNITION

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			
Mr Carl P Satterwhite Chair	3 0	X		X				0	0	0
Mr James C Ellerhorst Past Chair	2 0	X		X				0	0	0
Ms Tillie Hidalgo Lima Secretary	1 0	X		X				0	0	0
Ms Carolyn Pione Micheli Board Member, Vice Chair, Marketing	2 0	X		X				0	0	0
Ms Julia W Poston Board Member, Vice Chair, Community Impact	3 0 1 0	X		X				0	0	0
Mr Kenneth W Stecher Board Member, Vice Chair, Accountability & Services	2 0	X		X				0	0	0
Mr Robert C Reifsnyder President/CEO	70 0 2 0	X		X				389,158	0	46,749
Ms Shakila T Ahmad Board Member	1 0	X						0	0	0
Mr Clifford A Bailey Board Member	1 0	X						0	0	0
Ms Karen Bankston PhD Board Member	1 0	X						0	0	0
Ms Kathleen S Barclay Board Member	1 0	X						0	0	0
Mr Mark F Biegger Board Member	1 0	X						0	0	0
Mr James Brown Board Member	1 0	X						0	0	0
Mr William P Butler Board Member	1 0	X						0	0	0
Mr Bret A Caller Board Member	1 0	X						0	0	0
Mr Kevin M Carroll Board Member, Chair Volunteer Connection	2 0	X						0	0	0
Mr Michael Comer Board Member	1 0	X						0	0	0
Mr Alfonso Cornejo Board Member	1 0	X						0	0	0
Mr Steve Cruse Board Member	1 0	X						0	0	0
Ms Julie Dietz Board Member	1 0	X						0	0	0
Mr David L Faulk Board Member	1 0	X						0	0	0
Mr Christopher C Froman At Large Member	1 0	X						0	0	0
Ms Kay Geiger Board Member, Co-Chair Regional Public Policy Council	2 0	X						0	0	0
Mr David J Gooch Board Member	1 0	X						0	0	0
Mr Merwin Grayson Jr Board Member	1 0 1 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			
LaVaughn Henry PhD Board Member	1 0	X						0	0	0
Ms Julie B Highley Board Member	1 0	X						0	0	0
Mr Gary T Huffman Board Member	1 0	X						0	0	0
G Edward Hughes PhD Board Member	1 0	X						0	0	0
Mr Mark J Jahnke Board Member	1 0	X						0	0	0
Mr David L Joyce Board Member	1 0	X						0	0	0
Mr Jerome C Kathman Board Member	1 0	X						0	0	0
Ms Jane M Keller Board Member, Chair Leadership Council of Human Services Execs	2 0	X						0	0	0
Ms Lee Ann Liska Board Member	1 0	X						0	0	0
Mr Roni J Luckenbill Board Member	1 0	X						0	0	0
Mr James E May Board Member	1 0	X						0	0	0
Mr Patrick E McCausland Board Member	1 0	X						0	0	0
Mr Philip R McHugh Board Member	1 0	X						0	0	0
Mr Peter McLinden Board Member, Chair Community Services	2 0	X						0	0	0
Mr Geoffrey Mearns Board Member	1 0	X						0	0	0
Ms Mary Miller Board Member	1 0	X						0	0	0
Santa J Ono PhD Board Member	1 0	X						0	0	0
Ms Penny Pensak Board Member	1 0	X						0	0	0
Mr David C Phillips Board Member	1 0	X						0	0	0
Mr Scott D Phillips Board Member, Chair Middletown Area	2 0	X						0	0	0
Mr R Michael Prescott Board Member	1 0	X						0	0	0
Mr John S Prout Board Member	1 0	X						0	0	0
Ms Johnna N Reeder Board Member	1 0	X						0	0	0
Mr Manuel Z Rios Board Member	1 0	X						0	0	0
Mr Sean Rugless Board Member	1 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			
Mr William L Scheyer Board Member	1 0	X						0	0	0
Ms Julie A Sellers Board Member	1 0	X						0	0	0
Mr Charles L Session Jr Board Member	1 0	X						0	0	0
Mr Steven J Shifman Board Member, Co-Chair Regional Public Policy Council	2 0	X						0	0	0
Ms Mary Stagaman Board Member	1 0	X						0	0	0
Mr J Shane Starkey Board Member	1 0	X						0	0	0
Mr Philip Thoms Board Member, Emerging Leaders Intern	1 0	X						0	0	0
Mr Theodore H Torbeck Board Member	1 0	X						0	0	0
Mr Matthew D Van Sant Board Member, Chair Eastern Area	2 0	X						0	0	0
Mr James L Wainscott Board Member	1 0	X						0	0	0
Mr George E Yund Board Member, Chair UWGC Foundation	2 0 1 0	X						0	0	0
Ms Karen M Zengel Board Member, Chair Northern Kentucky Area	2 0	X						0	0	0
Mr John S Dubis Board Member, End April 2015	1 0	X						0	0	0
Mr Michael J Laatsch Board Member, End April 2015	1 0	X						0	0	0
Mr Victor A Needham III Board Member, End April 2015	1 0	X						0	0	0
Ms Jacquelyn D Phillips Board Member, End April 2015	1 0	X						0	0	0
Mr J Michael Robinson Board Member, End April 2015	1 0	X						0	0	0
Mr Brent R Seelmeyer Board Member, End April 2015	1 0	X						0	0	0
Mr Douglas E Sizemore Board Member, End April 2015	1 0	X						0	0	0
Ms Yvonne Washington Executive Vice President / COO	52 0 2 0			X				242,944	0	43,242
Ms Carol Aquino Vice President Marketing	50 0				X			158,963	0	20,863
Mr Christopher Martin Vice President Development	55 0				X			157,325	0	33,610
Ms Margaret Hulbert VP Strategic Res & Pub Policy	66 0					X		131,904	0	33,593
Ms Jill Johnson Vice President Finance & Operations	45 0 4 0					X		143,590	0	20,136
Mr Ross Meyer Vice President Community Impact	55 0					X		127,715	0	31,214

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			
Ms Margaret Clark Director Every Child Succeeds	50 0					X		122,983	0	10,498
Ms Janice Urbanik Director Partners for a Competitive Workforce	50 0					X		101,280	0	16,322

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of Greater Cincinnati

Employer identification number
31-0537502

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)	65,764,795	64,187,705	62,773,714	62,750,144	61,677,581	317,153,939
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	65,764,795	64,187,705	62,773,714	62,750,144	61,677,581	317,153,939
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)						10,234,311
6 Public support. Subtract line 5 from line 4						306,919,628

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	65,764,795	64,187,705	62,773,714	62,750,144	61,677,581	317,153,939
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,071,805	1,099,632	1,167,842	1,067,239	1,029,078	5,435,596
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	91,276	140,597	131,744	121,696	148,345	633,658
11 Total support. Add lines 7 through 10						323,223,193
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 checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	94.96 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	94.96 %
16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input checked="" type="checkbox"/>	

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV Supporting Organizations (continued)**Section B. Type I Supporting Organizations**

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**)
- a** The organization satisfied the Activities Test. Complete **line 2** below
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below
- c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test **Answer (a) and (b) below.**

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

3 Parent of Supported Organizations **Answer (a) and (b) below.**

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

	Yes	No
2a		
2b		
3a		
3b		

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

- | | | Current Year |
|---|----------|--------------|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 Enter 85% of line 1 | 2 | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 Enter greater of line 2 or line 3 | 4 | |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |
| 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/> | | |

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$ _____			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
c Excess from 2013.			
d From 2014.			
e From 2015.			

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).

Facts And Circumstances Test

Return Reference

Explanation

Schedule A, Part II, Line 10 Other Income

DESCRIPTION - MISCELLANEOUS, COLUMN A - 91276 0, COLUMN B - 140597 0, COLUMN C - 131744 0, COLUMN D - 121696 0, COLUMN E - 148345 0, COLUMN F - 633658 0,

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

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

Name of the organization: United Way of Greater Cincinnati
Employer identification number: 31-0537502

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

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

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

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

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

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

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received. Rows 1-6.

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)	48,513													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	176,167													
c Total lobbying expenditures (add lines 1a and 1b)	224,680													
d Other exempt purpose expenditures	62,387,743													
e Total exempt purpose expenditures (add lines 1c and 1d)	62,612,423													
f Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	0												
<table border="1"> <thead> <tr> <th align="left">If the amount on line 1e, column (a) or (b) is:</th> <th align="left">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>			If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-	0													
i Subtract line 1f from line 1c If zero or less, enter -0-	0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	167,640	180,920	238,060	224,680	811,300
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	33,646	46,046	47,898	48,513	176,103

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)).

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

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
Schedule C, Part II-A Lobbying Activities	<p>United Way of Greater Cincinnati is a leader in public policy research, education and advocacy activities We recognize that public funding of health and human services will always substantially exceed private support We strive to create effective partnerships between government and nonprofit organizations, and we share our experience and expertise with the public sector as part of that partnership We serve on multiple committees and panels designed to coordinate public and private services and work with elected and appointed officials in Kentucky, Ohio and Indiana and on the federal level on health, human service and community development and nonprofit effectiveness and accountability We encourage our agency partners and other nonprofit organizations to advocate on behalf of their programs and the people they serve because we know they have direct service experience and knowledge on critical community issues We encourage nonprofits to develop relationships with elected and appointed government officials, and to consistently educate them about their services, clients and communities We urge nonprofits to take a positive approach toward lobbying, stressing education, information and issue-focused advocacy In 2015, United Way of Greater Cincinnati recorded expenditures of \$259,600 for the Public Policy and Government Relations function This amount provided salaries for approximately 195 full-time equivalent staff positions This total amount included salaries, benefits, occupancy and office expenses, travel and meetings Of the total amount spent on public policy, no more than 30% or \$77,880 was spent on lobbying and no more than 30% of that amount, or \$23,364 was spent on grassroots lobbying In 2015, United Way staff worked closely with federal, state and local government to create partnerships for the effective and efficient delivery of health and human services in a two state, eight county region Staff lobbied elected and appointed officials on the following issues * At the federal level, we supported education, workforce, health and human services funding, tax and appropriate accountability standards for nonprofit organizations * In Ohio and Kentucky, we worked with the state administration and key legislators to provide them with information and guidance on social welfare policy, health and human services, public education, child health and early care and education, and nonprofit accountability * On a local level, we worked with local area development districts and County and City Governments to create public-private partnerships for the efficient, effective delivery of health and human services Through service contracts, we spent * \$36,000 to Top Shelf Lobby LLC to advocate for early childhood education in Kentucky Of that amount, no more than \$20,000 was spent on lobbying * \$50,000 to Vorys Advisors LLC to advocate for early childhood education in Ohio Of that amount, no more than \$35,000 was spent on lobbying We made the following allocations to other nonprofit organizations for education, advocacy or lobbying about public sector policies or funding * \$40,000 to Council for a Strong America for Ready Nation to advocate on behalf of early care and education in Ohio and on the federal level Of that amount, no more than 20% or \$8,000 was spent on lobbying, and no more than 50% of the lobbying amount, or \$4,000, was spent on grassroots lobbying * \$15,000 to Children Inc to advocate on behalf of early care and education in Kentucky Of that amount, no more than 30% or \$4,500 was spent on lobbying, and no more than 20% of the lobbying amount, or \$900, was spent on grassroots lobbying * \$60,000 to Community Initiatives to support groundWork to advocate on behalf of early care and education in Ohio Of that amount, no more than 50% or \$30,000 was spent on lobbying, and no more than 20% of the lobbying amount, or \$6,000, was spent on grassroots lobbying * \$4,000 to Indiana Association of United Ways to advocate on behalf of health and human services Of that amount, no more than 30% or \$1,200 was spent on lobbying, and no more than 20% of the lobbying amount, or \$240, was spent on grassroots lobbying * \$25,000 to Kentucky Youth Advocates to advocate on behalf of work supports benefits in Kentucky Of that amount, no more than 30% or \$7,500 was spent on lobbying, and no more than 20% of lobbying amount, or \$1,500, was spent on grassroots lobbying * \$25,000 to Ohio Justice & Policy Center to advocate for removing employment barriers for people with criminal records in Ohio Of that amount, no more than 30% or \$7,500 was spent on lobbying, and no more than 75% of the lobbying amount, or \$5,625, was spent on grassroots lobbying * \$20,000 to Policy Matters Ohio to provide research, education and advocacy on behalf of the Earned Income Tax Credit in Ohio Of that amount, no more than 20% or \$4,000 was spent on lobbying, and no more than 10% of the lobbying amount, or \$400, was spent on grassroots lobbying * \$30,000 to Prichard Committee to advocate on behalf of early care and education in Kentucky Of that amount, no more than 30% or \$9,000 was spent on lobbying, and no more than 20% of the lobbying amount, or \$1,800, was spent on grassroots lobbying * \$40,000 to Public Children Services Association of Ohio to support Advocates for Ohio's Future to advocate on behalf of health and human services funding in Ohio Of that amount, no more than 11% or \$4,400 was spent on lobbying, and no more than 95% of the lobbying amount, or \$4,180, was spent on grassroots lobbying The total spent by these organizations is no more than \$76,100 on lobbying, and of that amount, no more than \$24,645 was spent on grassroots lobbying As the fiscal agent for the Ohio Partnership to Build Stronger Families we spent * \$14,000 to Channing & Associates to advocate for home visiting in Ohio Of that amount, no more than \$9,000 was spent on lobbying * \$20,000 to Council for a Strong America to advocate for home visiting in Ohio Of that amount, no more than \$1,500 was spent on lobbying * \$44,000 to Tom Scheid Consulting to advocate for home visiting in Ohio Of that amount, no more than 10% or \$4,400 was spent on lobbying, and no more than 10% of the lobbying amount, or \$400, was spent on grassroots lobbying * \$20,000 to Voices for Ohio's Children to advocate for home visiting in Ohio Of that amount, no more than 4%, or \$800, was spent on lobbying And no more than 13% of the lobbying amount, or \$104, was spent on grassroots lobbying The total spent on behalf of the Ohio Partnership to Build Stronger Families is no more than \$15,700 on lobbying and of that amount, no more than \$504 was spent on grassroots lobbying</p>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2015

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization United Way of Greater Cincinnati

Employer identification number 31-0537502

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, and aggregate value at end of year. Includes questions 5 and 6 regarding donor informed status.

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

Form for Part II Conservation Easements. Includes questions 1-9 regarding purpose of easements, acreage, monitoring, and expenses. Includes a table for 'Held at the End of the Year' with rows 2a, 2b, 2c, 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions 1a, 1b, 2, and 3 regarding reporting requirements for art and historical treasures.

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?

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

Table with 2 columns: Description (1c-1f) and Amount. Rows include Beginning balance, Additions during the year, Distributions during the year, and Ending balance.

- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, and End of year balance.

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

- a Board designated or quasi-endowment 100%
b Permanent endowment 0%
c Temporarily restricted endowment 0%
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

Table with 2 columns: Yes, No. Rows include 3a(i) unrelated organizations, 3a(ii) related organizations, and 3b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

- (i) unrelated organizations
(ii) related organizations

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' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include Land, Buildings, Leasehold improvements, Equipment, Other, and Total.

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

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

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
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
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
Federal income taxes	
AGENCY CUSTODIAL FUND PAYABLE	90,820
INTEREST RATE SWAP AGREEMENT	65,819
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 156,639

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	56,005,873
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-17,373	
b	Donated services and use of facilities	2b	1,648,173	
c	Recoveries of prior year grants	2c	0	
d	Other (Describe in Part XIII)	2d	1,003,108	
e	Add lines 2a through 2d			2e 2,633,908
3	Subtract line 2e from line 1			3 53,371,965
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	
b	Other (Describe in Part XIII)	4b	10,698,851	
c	Add lines 4a and 4b			4c 10,698,851
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5 64,070,816

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

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

1	Total expenses and losses per audited financial statements		1	53,561,745
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	1,648,173	
b	Prior year adjustments	2b	0	
c	Other losses	2c	0	
d	Other (Describe in Part XIII)	2d	0	
e	Add lines 2a through 2d			2e 1,648,173
3	Subtract line 2e from line 1			3 51,913,572
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	
b	Other (Describe in Part XIII)	4b	10,698,851	
c	Add lines 4a and 4b			4c 10,698,851
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5 62,612,423

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	INTENDED USES OF UWGC'S ENDOWMENT FUNDS The endowment funds of UWGC are used to fund programs that support the greater Cincinnati human service community
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	FIN 48 UWGC IS EXEMPT FROM INCOME TAXES UNDER SECTION 501 OF THE INTERNAL REVENUE CODE AND A SIMILAR PROVISION OF STATE LAW HOWEVER, UWGC IS SUBJECT TO FEDERAL INCOME TAX ON ANY UNRELATED BUSINESS TAXABLE INCOME UWGC FILES TAX RETURNS IN THE U S FEDERAL JURISDICTION
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	Market value change in beneficial interest - -78882 Market value change in interest rate swap agreement - 88236 Provision for uncollectible pledges - 993754
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Amounts designated by contributors - 10698851
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Amounts designated by contributors - 10698851

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2015

**Open to Public
Inspection**

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

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of Greater Cincinnati

Employer identification number
31-0537502

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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)
		Golf Outing (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	65,757			65,757
	2 Less Contributions	35,550			35,550
	3 Gross income (line 1 minus line 2)	30,207	0	0	30,207
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	6,185			6,185
	6 Rent/facility costs	7,700			7,700
	7 Food and beverages	5,225			5,225
	8 Entertainment				
	9 Other direct expenses	2,287			2,287
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				21,397
11 Net income summary Subtract line 10 from line 3, column (d) ▶				8,810	

Part III Gaming.

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

.....

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

.....

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in

a	The organization's facility		%
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 complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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Schedule I (Form 990)

OMB No 1545-0047

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

2015

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization United Way of Greater Cincinnati

Employer identification number 31-0537502

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?
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

Table with 8 columns: (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. Row 1 contains 'See Additional Data Table'.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 207
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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	<p>Grant Monitoring Procedures Community Impact United Way of Greater Cincinnati (UWGC) uses the Call for Investment (CFI) system, which includes the Letter of Intent (LOI), Letter of Continuation (LOC) and the Program Proposal (PP), for determining program investment. The key principles for reviewing and selecting programs for investment and in monitoring program performance are: 1) impact - demonstrating the measurable change and improvement in lives and community, 2) alignment - contributing to the goals of the Agenda for Community Impact, and, 3) accountability - delivering efficient, effective and quality services. Starting in 2016, the program monitoring process - the programs are responsible for executing services as they are defined in their approved proposals. The programs will submit annual reports that reflect budgets, demographics and results. The programs will have annual site visits to communicate results. The programs will adhere to any pre-defined funding conditions. The program will be given feedback on the status of their grant at the end of each year. The Call for Investment operates on three-year Investment Cycles, the first cycle covered the period January 2007 - December 2009. In 2009, decisions were made for the second funding cycle to cover the period January 2010 - December 2012. In 2012, decisions were made for the third funding cycle to cover the period January 2013 - December 2015. In January of 2015, UWGC began the CFI 4.0 for the funding cycle of 2016-2017 (due to a shift by the Board of Directors (BOD) on poverty & integration, it will be a two year cycle). The LOI is the initial mechanism through which UWGC seeks to identify new programs, initiatives, activities, and partnerships that offer the most promise for helping to achieve the goals and outcomes of the Agenda for Community Impact. Following a review of the LOIs by volunteer and staff teams, organizations with programs deemed to have potential for maximum impact on achieving the goals of the Agenda for Community Impact are invited to submit a proposal. Letters of Continuation (LOC) is the tool used to evaluate currently funded programs for continued investment. Volunteer and staff review teams evaluate the proposals using a defined set of criteria. Final approval of programs accepted for investment is contingent upon a successful UWGC campaign. To fulfill our accountability to donors and as a condition of UWGC funding, organizations are required to adhere to UWGC policies, partnership marketing standards and submit reports within the identified timelines. Using the three criteria of impact, alignment and accountability, evaluation is made against the following: 1) outcomes measurement and reporting, 2) monitoring expectations, 3) partnership marketing, and, 4) audit review. Organizations are responsible for implementing and managing a useful, feasible and accurate outcomes measurement system for measuring and reporting client results. Results are reported by all programs on an annual basis, in addition, programs report mid-year progress on outcomes. Organizations are evaluated on their ability to report on progress in achieving outcomes and developing program improvements based on results. UWGC volunteers and staff conduct annual site visits to monitor program activities in operation, tour facilities, discuss program progress, and meet program and management staff and volunteer leadership. Organizations must submit a completed IRS Form 990 and a certified audit of financial statements each year, which is reviewed by staff and volunteers with accounting experience. Ongoing program funding (2nd and 3rd year of the three-year funding cycle) is contingent upon the organization's operation and delivery of the funded services in an acceptable manner and continued compliance with UWGC's policies and standards.</p> <p>Designations Data is captured from the local and national web-based United Way electronic pledging system, scan and company-produced pledge/designation cards and spreadsheets. The data collected is used for recording contributions income, billing donors for their pledges, special donor recognition, determination of the amount of designated dollars to agency/community partners and other local United Ways (LUW) and their agency partners and payout of those designated dollars.</p> <p>General Monitoring (USA PATRIOT and Counterterrorism Laws) In compliance with the spirit and intent of the USA PATRIOT Act and other counterterrorism laws, UWGC has procedures in place to verify that organizations receiving UWGC funds are in compliance with applicable anti-terrorism financing and asset control laws, statutes and executive orders.</p> <p>Amount of Cash Grant Column (d) The remaining distributions not listed in Part II, include designations and other allocations from 2015 that will be paid in 2016 based on amounts collected and grant amounts less than or equal to \$5,000.</p> <p>Purpose of Grant Part II, column (h) Purpose of grant or assistance definitions per United Way Worldwide</p> <ul style="list-style-type: none"> * Program Operating Cost - A restricted grant made to an agency in support of the costs associated with a specific program that it operates * Community Collaboration - A restricted grant made to a fund the costs associated with bringing organizations within the community together for the purpose of creating collaborative efforts that will address specific community issues * Donor Designated for General Support - An unrestricted grant made to an agency at the direction of the donor(s) in support of its general operating costs, community collaboration, and donor designated general support

Additional Data

Software ID: 15000238
Software Version: 2015v2.1
EIN: 31-0537502
Name: United Way of Greater Cincinnati

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
4C for Children 1924 Dana Avenue Cincinnati, OH 45207	31-0823634	501 (c) (3)	750,584				Program Oper Cost
4C for Children 1924 Dana Avenue Cincinnati, OH 45207	31-0823634	501 (c) (3)	2,000				Donor Designated
Abilities First 4710 Timber Trail Drive Middletown, OH 45044	31-0620685	501 (c) (3)	127,353				Program Oper Cost

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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
Adams Brown Counties Economic Opportunities Inc 406 West Plum Street Georgetown, OH 45121	31-0710683	501 (c) (3)	32,585				Program Oper Cost
Addiction Services Council 2828 Vernon Place Cincinnati, OH 45219	31-0784671	501 (c) (3)	69,000				Program Oper Cost
Adopt-A-Class Foundation 2153 West Eight Street Cincinnati, OH 45204	20-2587229	501 (c) (3)	25,000				Program Oper Cost

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Alcohol & Chemical Abuse Council of Southwestern Ohio 2935 Hamilton Mason Road Hamilton, OH 45011	31-6059934	501 (c) (3)	41,895				Program Oper Cost
American Cancer Society 2808 Reading Road Cincinnati, OH 45206	13-1788491	501 (c) (3)	442,470				Program Oper Cost
American Heart Association Greater Cincinnati & Northern Kentucky Divisions 5211 Madison Road Cincinnati, OH 45227	13-5616797	501 (c) (3)	113,378				Program Oper Cost

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American Lung Association of Ohio Southwest Region 4050 Executive Park Drive Cincinnati, OH 45241	31-4379531	501 (c) (3)	50,515				Program Oper Cost
American Red Cross Greater Cincinnati-Dayton Region 2111 Dana Avenue Cincinnati, OH 45207	53-0196605	501 (c) (3)	4,624,900				Community Collaboration
Arthritis Foundation Great Lakes Region Inc 7124 Miami Avenue Cincinnati, OH 45243	27-4014550	501 (c) (3)	65,660				Program Oper Cost

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BAWAC Inc 7970 Kentucky Drive Florence, KY 41042	61-0844925	501 (c) (3)	67,032				Program Oper Cost
Beech Acres Parenting Center 6881 Beechmont Avenue Cincinnati, OH 45230	31-0536663	501 (c) (3)	130,895				Program Oper Cost
Beech Acres Parenting Center 6881 Beechmont Avenue Cincinnati, OH 45230	31-0536663	501 (c) (3)	50,000				Donor Designated

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Bethany House Services 1841 Fairmount Avenue Cincinnati, OH 45214	31-1101401	501 (c) (3)	90,000				Program Oper Cost
Big Brothers Big Sisters of Butler County 5539 Eureka Drive Hamilton, OH 45011	31-0846147	501 (c) (3)	61,368				Program Oper Cost
Big Brothers Big Sisters of Greater Cincinnati 2400 Reading Road Cincinnati, OH 45202	31-0577668	501 (c) (3)	440,000				Program Oper Cost

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Big Brothers Big Sisters of Greater Cincinnati 2400 Reading Road Cincinnati, OH 45202	31-0577668	501 (c) (3)	13,000				Donor Designated
Boy Scouts of America Dan Beard Council 10078 Reading Road Cincinnati, OH 45241	31-0536651	501 (c) (3)	636,804				Program Oper Cost
Boy Scouts of America Dan Beard Council 10078 Reading Road Cincinnati, OH 45241	31-0536651	501 (c) (3)	5,000				Donor Designated

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Boys & Girls Clubs of Greater Cincinnati 600 Dalton Avenue Cincinnati, OH 45203	31-0536965	501 (c) (3)	911,710				Program Oper Cost
Boys & Girls Clubs of Greater Cincinnati 600 Dalton Avenue Cincinnati, OH 45203	31-0536965	501 (c) (3)	2,000				Donor Designated
Breakthrough Cincinnati 6905 Given Road Cincinnati, OH 45203	31-1357625	501 (c) (3)	30,000				Program Oper Cost

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Brighton Center Inc 741 Central Avenue Newport, KY 41071	61-0673886	501 (c) (3)	1,454,896				Program Oper Cost
Brown County Educational Service Center 9231 Hamer Road Georgetown, OH 45121	31-1081006	School District	10,241				Program Oper Cost
Brown County Helping Hands 668 Camp Run Road Georgetown, OH 45121	31-6084499	501 (c) (3)	27,930				Program Oper Cost

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Brown County Senior Citizens Council 505 North Main Street Georgetown, OH 45121	51-0166580	501 (c) (3)	83,300				Program Oper Cost
Building Blocks for Kids 7577 Central Parke Blvd Mason, OH 45040	68-0535595	501 (c) (3)	8,003				Program Oper Cost
Butler County Educational Service Center 400 North Erie Blvd Hamilton, OH 45011	31-0852952	School District	60,515				Program Oper Cost

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Butler County United Way 323 N Third Street Hamilton, OH 45011	31-0734490	501 (c) (3)	208,968				Donor Designated
Camp Joy Foundation 10117 Old 3-C Highway Clarksville, OH 45113	31-0672822	501 (c) (3)	10,000				Program Oper Cost
Camp Joy Foundation 10117 Old 3-C Highway Clarksville, OH 45113	31-0672822	501 (c) (3)	2,000				Donor Designated

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Cancer Family Care Inc 2421 Auburn Avenue Cincinnati, OH 45219	31-0805286	501 (c) (3)	251,000				Program Oper Cost
Caracole Inc 4138 Hamilton Avenue Cincinnati, OH 45223	31-1210524	501 (c) (3)	90,000				Program Oper Cost
Catholic Charities Diocese of Covington 3629 Church Street Covington, KY 41015	61-0461728	501 (c) (3)	326,050				Program Oper Cost

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Catholic Charities of Southwestern Ohio Mid Pointe Tower Cincinnati, OH 45237	31-0536968	501 (c) (3)	19,495				Donor Designated
Catholic Charities of SouthWestern Ohio Mid Pointe Tower Cincinnati, OH 45237	31-0536968	501 (c) (3)	827,091				Program Oper Cost
Center for Chemical Addictions Treatment 830 Ezzard Charles Drive Cincinnati, OH 45214	31-0792742	501 (c) (3)	105,000				Program Oper Cost

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Center for Great Neighborhoods of Covington 1650 Russell Street Covington, KY 41011	61-0733046	501 (c) (3)	168,725				Program Oper Cost
Central Clinic 311 Albert Sabin Way Cincinnati, OH 45229	31-1411744	501 (c) (3)	813,200				Program Oper Cost
Central Connections 3907 Central Avenue Middletown, OH 45044	31-1026085	501 (c) (3)	121,520				Program Oper Cost

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Child Focus Inc 555 Cincinnati-Batavia Pike Cincinnati, OH 45244	31-0952668	501 (c) (3)	289,750				Program Oper Cost
Children Inc 333 Madison Avenue Covington, KY 41011	31-0910787	501 (c) (3)	1,092,600				Program Oper Cost
Children's Law Center 1002 Russell Street Covington, KY 41011	61-1167352	501 (c) (3)	21,070				Program Oper Cost

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Children's Law Center 1002 Russell Street Covington, KY 41011	61-1167352	501 (c) (3)	2,335				Donor Designated
Churches Active In Northside 4230 Hamilton Avenue Cincinnati, OH 45223	31-1341556	501 (c) (3)	35,504				Program Oper Cost
Cincinnati Area Senior Services Inc 2368 Victory Parkway Cincinnati, OH 45206	31-0825754	501 (c) (3)	348,000				Program Oper Cost

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Cincinnati Arts & Technology Center 700 W Pete Rose Way Cincinnati, OH 45203	20-0105431	501 (c) (3)	59,400				Program Oper Cost
Cincinnati Arts & Technology Center 700 W Pete Rose Way Cincinnati, OH 45203	20-0105431	501 (c) (3)	70,000				Donor Designated
Cincinnati Association for the Blind and Visually Impaired 2045 Gilbert Avenue Cincinnati, OH 45202	31-0538511	501 (c) (3)	264,885				Program Oper Cost

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Cincinnati Childrens Hospital Medical Center 3333 Burnet Avenue Cincinnati, OH 45229	31-0833936	501 (c) (3)	345,235				Program Oper Cost
Cincinnati Childrens Hospital Medical Center 3333 Burnet Avenue Cincinnati, OH 45229	31-0833936	501 (c) (3)	10,000				Donor Designated
Cincinnati Early Learning Centers Inc 1301 East McMillan Street Cincinnati, OH 45206	31-1110503	501 (c) (3)	410,000				Program Oper Cost

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

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Cincinnati Public Schools Department of Early Childhood Education 2651 Burnet Avenue Cincinnati, OH 45219	31-6000758	School District	388,750				Program Oper Cost
Cincinnati Union Bethel 2401 Reading Road Cincinnati, OH 45202	31-0536655	501 (c) (3)	207,000				Program Oper Cost
Cincinnati Works 708 Walnut Street Cincinnati, OH 45202	31-1656186	501 (c) (3)	270,000				Program Oper Cost

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

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Cincinnati Works 708 Walnut Street Cincinnati, OH 45202	31-1656186	501 (c) (3)	2,000				Donor Designated
Cincinnati Youth Collaborative 301 Oak Street Cincinnati, OH 45219	31-1204406	501 (c) (3)	80,240				Program Oper Cost
Cincinnati Youth Collaborative 301 Oak Street Cincinnati, OH 45219	31-1204406	501 (c) (3)	2,000				Donor Designated

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Cincinnati-Hamilton County Community Action Agency 1740 Langdon Farm Road Cincinnati, OH 45237	31-6053035	501 (c) (3)	58,360				Program Oper Cost
CincySmiles Foundation 635 West Seventh Street Cincinnati, OH 45203	31-0537044	501 (c) (3)	131,509				Program Oper Cost
Clearinghouse 215 Fourth Street Aurora, IN 47001	31-1158133	501 (c) (3)	10,000				Program Oper Cost

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Clermont County Community Services Inc 3003 Hospital Drive Batavia, OH 45103	31-1111703	501 (c) (3)	178,415				Program Oper Cost
Clermont Senior Services Inc 2085 James E Sauls Sr Drive Batavia, OH 45103	31-0832354	501 (c) (3)	176,003				Program Oper Cost
Clovernook Center for the Blind and Visually Impaired 7000 Hamilton Avenue Cincinnati, OH 45231	31-0584310	501 (c) (3)	8,003				Program Oper Cost

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Community Building Institute Middletown 800 Lafayette Ave Middletown, OH 45044	46-5205808	501 (c) (3)	85,000				Community Collaboration
Community Building Institute Middletown 800 Lafayette Ave Middletown, OH 45044	46-5205808	501 (c) (3)	11,150				Program Oper Cost
Corporation for Ohio Appalachian Development PO Box 787 Athens, OH 45701	31-0811788	501 (c) (3)	27,930				Program Oper Cost

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Council on Child Abuse 4440 Lake Forest Drive Cincinnati, OH 45242	31-0942232	501 (c) (3)	30,135				Program Oper Cost
Covington Partners 257 Pike Street Covington, KY 41011	20-1515753	501 (c) (3)	104,500				Program Oper Cost
Crossroad Health Center 5 East Liberty Street Cincinnati, OH 45202	31-1321054	501 (c) (3)	150,000				Program Oper Cost

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DCCH Center for Children and Families 75 Orphanage Road Fort Mitchell, KY 41017	61-0463943	501 (c) (3)	89,376				Program Oper Cost
Dearborn County Hospital Home Health and Hospice 370 Bielby Road Lawrenceburg, IN 47025	35-6006595	501 (c) (3)	5,635				Program Oper Cost
Dearborn County Retired Senior Volunteer Program 98 E High Street Lawrenceburg, IN 47025	35-1185161	501 (c) (3)	10,000				Program Oper Cost

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Design Impact 205 W 4St Cincinnati, OH 45202	26-4662578	501 (c) (3)	13,060				Program Oper Cost
Diocesan Catholic Children's Home PO Box 17007 Ft Mitchell, KY 41017	61-0463943	501 (c) (3)	30,146				Donor Designated
Down Syndrome Association 4623 Wesley Avenue Cincinnati, OH 45212	31-1051378	501 (c) (3)	12,760				Program Oper Cost

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Easter Seals TriState 2901 Gilbert Avenue Cincinnati, OH 45206	31-0873433	501 (c) (3)	161,900				Program Oper Cost
Every Child Succeeds 3333 Burnet Avenue Cincinnati, OH 45229	31-1628467	501 (c) (3)	2,938,200				Program Oper Cost
Every Child Succeeds 3333 Burnet Avenue Cincinnati, OH 45229	31-1628467	501 (c) (3)	94,500				Donor Designated

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FamiliesFORWARD 2400 Reading Road Cincinnati, OH 45202	31-0536684	501 (c) (3)	541,489				Program Oper Cost
FamiliesFORWARD 2400 Reading Road Cincinnati, OH 45202	31-0536684	501 (c) (3)	5,000				Donor Designated
Family Connections PO Box 766 Versailles, IN 47042	35-1595737	501 (c) (3)	10,000				Program Oper Cost

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 Nurturing Center 8275 Ewing Boulevard Florence, KY 41042	31-1011326	501 (c) (3)	134,900				Program Oper Cost
Family Service of Middletown 1311 Columbia Avenue Middletown, OH 45042	31-1023843	501 (c) (3)	114,375				Program Oper Cost
Flywheel Social Enterprise Hub 1650 Russell Street Covington, KY 41011	46-0889572	501 (c) (3)	15,000				Program Oper Cost

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Freestore Foodbank 1141 Central Parkway Cincinnati, OH 45202	23-7122205	501 (c) (3)	404,288				Program Oper Cost
Freestore Foodbank 1141 Central Parkway Cincinnati, OH 45202	23-7122205	501 (c) (3)	50,000				Donor Designated
Gabriel's Place 412 Sycamore Street Cincinnati, OH 45202	45-5333845	501 (c) (3)	57,500				Donor Designated

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Girl Scouts of Kentucky's Wilderness Road Council 607 Watson Road Erlanger, KY 41018	61-0608104	501 (c) (3)	29,400				Program Oper Cost
Girl Scouts of Western Ohio 4930 Cornell Road Cincinnati, OH 45242	31-0679091	501 (c) (3)	503,500				Program Oper Cost
GRAD Cincinnati Inc PO Box 19477 Cincinnati, OH 45219	31-1816376	501 (c) (3)	85,000				Program Oper Cost

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Great Miami Valley YMCA Metropolitan Office Hamilton, OH 45011	31-0536719	501 (c) (3)	44,294				Program Oper Cost
Great Miami Valley YMCA Metropolitan Office Hamilton, OH 45011	31-0536719	501 (c) (3)	2,742				Donor Designated
Great Oaks Institute Health Professions Academy Super Jobs Center Cincinnati, OH 45214	31-0793117	School District	90,000				Program Oper Cost

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Greater Cincinnati Behavioral Health Services 1501 Madison Road Cincinnati, OH 45206	31-0802647	501 (c) (3)	80,750				Program Oper Cost
Greater Cincinnati Foundation PO Box 5200 Cincinnati, OH 45201	31-0669700	501 (c) (3)	175,000				Community Collaboration
Greater Cincinnati Foundation PO Box 5200 Cincinnati, OH 45201	31-0669700	501 (c) (3)	33,135				Donor Designated

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Greater Cincinnati Microenterprise Initiative 1740 Langdon Farm Road Cincinnati, OH 45237	31-1595820	501 (c) (3)	51,205				Program Oper Cost
Greater Cincinnati Sports Corporation 700 W Pete Rose Way Cincinnati, OH 45203	31-1276563	501 (c) (3)	5,892				Donor Designated
Hamilton County Developmental Disabilities Services 1520 Madison Road Cincinnati, OH 45206		Public Service	8,378				Program Oper Cost

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Health Care Access Now 7162 Reading Road Cincinnati, OH 45237	26-4042151	501 (c) (3)	75,000				Program Oper Cost
Health Collaborative of Greater Cincinnati 2100 Sherman Avenue Cincinnati, OH 45212	31-1449807	501 (c) (3)	100,000				Donor Designated
HealthPoint Family Care 1401 Madison Avenue Covington, KY 41011	61-0729915	501 (c) (3)	65,170				Program Oper Cost

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Hearing Speech & Deaf Center of Greater Cincinnati 2825 Burnet Avenue Cincinnati, OH 45219	31-0536654	501 (c) (3)	224,583				Program Oper Cost
Heart House Inc 6815 US 50 Aurora, IN 47001	35-2036398	501 (c) (3)	10,290				Program Oper Cost
Holly Hill Children's Services 9599 Summer Hill Road California, KY 41007	61-0461729	501 (c) (3)	53,067				Program Oper Cost

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Hoosier Hills Literacy League 123 West High Street Lawrenceburg, IN 47025	35-1802183	501 (c) (3)	10,000				Program Oper Cost
Hoosier Trails Council Boy Scouts of America 5625 East State Road 46 Bloomington, IN 47401	35-1290776	501 (c) (3)	11,172				Program Oper Cost
Hope House Rescue Mission 34 South Main Street Middletown, OH 45044	31-1254976	501 (c) (3)	36,309				Program Oper Cost

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Housing O pportunities Made Equal 2400 Reading Road Cincinnati, OH 45202	31-6062015	501 (c) (3)	79,135				Program O per Cost
Hyde Park Center for Older Adults 2800 Erie Avenue Cincinnati, OH 45208	31-0857401	501 (c) (3)	60,760				Program O per Cost
Hyde Park Center for Older Adults 2800 Erie Avenue Cincinnati, OH 45208	31-0857401	501 (c) (3)	2,000				Donor Designated

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Interfaith Hospitality Network of Greater Cincinnati Inc 990 Nassau Street Cincinnati, OH 45206	31-1335474	501 (c) (3)	55,100				Program Oper Cost
Jewish Family Service of the Cincinnati Area 8487 Ridge Road Cincinnati, OH 45236	31-0744786	501 (c) (3)	388,400				Program Oper Cost
Jewish Federation of Cincinnati 8499 Ridge Road Cincinnati, OH 45236	31-0537174	501 (c) (3)	100,000				Community Collaboration

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Kennedy Heights Montessori Center 6120 Ridge Avenue Cincinnati, OH 45213	31-0724420	501 (c) (3)	21,413				Program Oper Cost
KnowledgeWorks One West 4th Street Cincinnati, OH 45202	31-1321973	501 (c) (3)	50,000				Program Oper Cost
Leadership Scholars Inc 125 West North Bend Road Cincinnati, OH 45216	20-8500457	501 (c) (3)	75,000				Community Collaboration

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Legal Aid of the Bluegrass 104 East Seventh Street Covington, KY 41011	61-0668572	501 (c) (3)	242,158				Program Oper Cost
Legal Aid Society of Greater Cincinnati 215 East Ninth Street Cincinnati, OH 45202	31-0536673	501 (c) (3)	453,054				Program Oper Cost
Life Learning Center 20 W 18th Street Covington, KY 41011	20-3454261	501 (c) (3)	152,000				Donor Designated

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Life Learning Center 20 W 18th Street Covington, KY 41011	20-3454261	501 (c) (3)	85,500				Program Oper Cost
LifePoint Solutions 3730 Glenway Avenue Cincinnati, OH 45205	31-0536973	501 (c) (3)	1,199,255				Program Oper Cost
LifeSpan Inc 1900 Fairgrove Avenue Hamilton, OH 45011	31-0536660	501 (c) (3)	16,758				Program Oper Cost

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LifeTime Resources Inc 13091 Benedict Drive Dillsboro, IN 47018	35-2076514	501 (c) (3)	25,235				Program Oper Cost
Lighthouse Youth Services 401 East McMillan Street Cincinnati, OH 45206	23-7046229	501 (c) (3)	270,000				Program Oper Cost
Lighthouse Youth Services 401 East McMillan Street Cincinnati, OH 45206	23-7046229	501 (c) (3)	4,275				Donor Designated

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Local Initiatives Support Corporation of Greater Cincinnati & Northern Kentucky 2400 Reading Rd Cincinnati, OH 45202	13-8030229	501 (c) (3)	1,230,000				Community Collaboration
Local Initiatives Support Corporation of Greater Cincinnati & Northern Kentucky 2400 Reading Rd Cincinnati, OH 45202	13-8030229	501 (c) (3)	207,500				Donor Designated
Madisonville Education and Assistance Center 4600 Erie Avenue Cincinnati, OH 45227	31-1218223	501 (c) (3)	75,000				Program Oper Cost

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Madisonville Education and Assistance Center 4600 Erie Avenue Cincinnati, OH 45227	31-1218223	501 (c) (3)	5,336				Donor Designated
Mayerson JCC 8485 Ridge Road Cincinnati, OH 45236	31-0536986	501 (c) (3)	117,000				Program Oper Cost
Mental Health America of Northern Kentucky and Southwest Ohio 912 Scott Street Covington, KY 41012	61-0712473	501 (c) (3)	113,700				Program Oper Cost

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Mercy Neighborhood Ministries 1602 Madison Road Cincinnati, OH 45206	31-1430847	501 (c) (3)	71,703				Program Oper Cost
National Kidney Foundation Greater Cincinnati Region 615 Elsinore Place Cincinnati, OH 45202	13-1673104	501 (c) (3)	50,936				Program Oper Cost
New Horizons Rehabilitation Inc 237 Six Pine Ranch Road Batesville, IN 47006	35-1169221	501 (c) (3)	10,000				Program Oper Cost

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New Perceptions Inc One Sperti Drive Edgewood, KY 41017	61-0705047	501 (c) (3)	236,098				Program Oper Cost
NonProfit Leadership Instititute 2600 Victory Parkway Cincinnati, OH 45206	31-0713350	501 (c) (3)	15,000				Program Oper Cost
Northern Kentucky Education Council 7310 Turfway Road Florence, KY 41042	21-3105862	501 (c) (3)	50,000				Program Oper Cost

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NorthKey Community Care 503 Farrell Drive Covington, KY 41011	61-0661458	501 (c) (3)	183,003				Program Oper Cost
People Working Cooperatively Inc 4612 Paddock Road Cincinnati, OH 45229	31-0859104	501 (c) (3)	121,030				Program Oper Cost
People Working Cooperatively Inc 4612 Paddock Road Cincinnati, OH 45229	31-0859104	501 (c) (3)	2,000				Donor Designated

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Per Scholas Inc 804 East 138th Street Bronx, NY 10454	04-3252955	501 (c) (3)	60,000				Community Collaboration
Power Inspires Progress 727 Ezzard Charles Drive Cincinnati, OH 45203	31-1367071	501 (c) (3)	44,100				Program Oper Cost
Primary Health Solutions 210 South Second Street Hamilton, OH 45011	31-1694200	501 (c) (3)	22,540				Program Oper Cost

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Pro Seniors Inc 7162 Reading Road Cincinnati, OH 45237	31-0887471	501 (c) (3)	125,000				Program Oper Cost
ProKids 2605 Burnet Avenue Cincinnati, OH 45219	31-1020021	501 (c) (3)	105,000				Program Oper Cost
Redwood School and Rehabilitation Center 71 Orphanage Road Fort Mitchell, KY 41017	61-6013702	501 (c) (3)	563,500				Program Oper Cost

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Redwood School and Rehabilitation Center 71 Orphanage Road Fort Mitchell, KY 41017	61-6013702	501 (c) (3)	1,316				Donor Designated
Safe Passage Inc P O Box 235 Batesville, IN 47006	01-0532835	501 (c) (3)	12,500				Community Collaboration
Santa Maria Community Services 617 Steiner Avenue Cincinnati, OH 45204	31-0537141	501 (c) (3)	978,520				Program Oper Cost

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Shared Harvest Foodbank 5901 Dixie Highway Fairfield, OH 45014	31-1096571	501 (c) (3)	23,275				Program Oper Cost
Shared Harvest Foodbank 5901 Dixie Highway Fairfield, OH 45014	31-1096571	501 (c) (3)	13,032				Donor Designated
Society of St Vincent De Paul 1125 Bank Street Cincinnati, OH 45214	31-0537510	501 (c) (3)	30,000				Donor Designated

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Sojourner Recovery Services 515 Dayton Street Hamilton, OH 45011	31-1070029	501 (c) (3)	29,400				Program Oper Cost
Southeastern Indiana Economic Opportunity Corporation 110 Importing Street Aurora, IN 47001	35-1118476	501 (c) (3)	10,000				Program Oper Cost
Southern Hills Career & Technical Center 9193 Hamer Road Georgetown, OH 45121	31-0793753	501 (c) (3)	13,892				Program Oper Cost

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St Joseph Orphanage 5400 Edalbert Drive Cincinnati, OH 45239	31-0537147	501 (c) (3)	110,000				Program Oper Cost
St Joseph Orphanage 5400 Edalbert Drive Cincinnati, OH 45239	31-0537147	501 (c) (3)	56,787				Donor Designated
St Rita School for the Deaf 1720 Glendale Milford Road Cincinnati, OH 45215	31-0537509	501 (c) (3)	155,000				Program Oper Cost

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St Rita School for the Deaf 1720 Glendale Milford Road Cincinnati, OH 45215	31-0537509	501 (c) (3)	2,000				Donor Designated
Starfire 5030 Oaklawn Drive Cincinnati, OH 45227	31-1372833	501 (c) (3)	50,000				Program Oper Cost
Stepping Stones Inc 5650 Given Road Cincinnati, OH 45243	31-0671799	501 (c) (3)	176,500				Program Oper Cost

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Stepping Stones Inc 5650 Given Road Cincinnati, OH 45243	31-0671799	501 (c) (3)	22,802				Donor Designated
Strategies to End Homelessness 2368 Victory Parkway Cincinnati, OH 45206	20-8286347	501 (c) (3)	302,100				Program Oper Cost
Supports to Encourage Low Income Families 1790 South Erie Boulevard Hamilton, OH 45012	31-1445223	501 (c) (3)	41,752				Program Oper Cost

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Talbert House 2600 Victory Parkway Cincinnati, OH 45206	31-0713350	501 (c) (3)	396,363				Program Oper Cost
Talbert House 2600 Victory Parkway Cincinnati, OH 45206	31-0713350	501 (c) (3)	2,000				Donor Designated
Teen Challenge Cincinnati 1466 US Highway 50 Milford, OH 45150	23-7303165	501 (c) (3)	72,693				Donor Designated

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Teen Challenge Cincinnati 1466 US Highway 50 Milford, OH 45150	23-7303165	501 (c) (3)	25,480				Program Oper Cost
Tender Mercies Inc 27 West 12th Street Cincinnati, OH 45202	31-1137270	501 (c) (3)	108,780				Program Oper Cost
Tender Mercies Inc 27 West 12th Street Cincinnati, OH 45202	31-1137270	501 (c) (3)	5,600				Donor Designated

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The Children's Home of Cincinnati Ohio 5050 Madison Road Cincinnati, OH 45227	31-0536969	501 (c) (3)	1,099,795				Program Oper Cost
The Children's Home of Cincinnati Ohio 5050 Madison Road Cincinnati, OH 45227	31-0536969	501 (c) (3)	2,000				Donor Designated
The Health Collaborative 2100 Sherman Avenue Cincinnati, OH 45212	31-1449807	501 (c) (3)	100,000				Community Collaboration

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The Literacy Council of Clermont & Brown Counties 745 Center Street Milford, OH 45150	31-1111791	501 (c) (3)	15,827				Program Oper Cost
The Salvation Army Indiana Division 3100 N Meridian Street Indianapolis, IN 46208	36-2167910	501 (c) (3)	10,000				Program Oper Cost
The Salvation Army of Greater Cincinnati 114 East Central Parkway Cincinnati, OH 45202	13-5562351	501 (c) (3)	409,153				Program Oper Cost

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The Salvation Army of Middletown 1914 First Avenue Middletown, OH 45042	13-5562351	501 (c) (3)	76,165				Program Oper Cost
Tristate Veterans Community Alliance 3805 Edwards Road Cincinnati, OH 45209	47-2444997	501 (c) (3)	10,000				Donor Designated
UC Foundation FAFSA PO Box 210392 Cincinnati, OH 45221	31-0896555	501 (c) (3)	10,000				Program Oper Cost

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United Ministries 525 Graves Avenue Erlanger, KY 41018	61-1017027	501 (c) (3)	13,034				Program Oper Cost
United Way of Clinton County 100 West Main Street Wilmington, OH 45177	23-7148000	501 (c) (3)	6,829				Donor Designated
United Way of Kentucky PO Box 4653 Louisville, KY 40204	31-1106795	501 (c) (3)	20,500				Program Oper Cost

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United Way of Warren County 645 Oak Street Lebanon, OH 45036	23-7132362	501 (c) (3)	28,900				Donor Designated
University of Cincinnati PO Box 210392 Cincinnati, OH 45221	31-0896555	501 (c) (3)	35,000				Program Oper Cost
Urban League of Greater Southwest Ohio 3458 Reading Road Cincinnati, OH 45229	31-0565428	501 (c) (3)	577,616				Program Oper Cost

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
Urban League of Greater Southwest Ohio 3458 Reading Road Cincinnati, OH 45229	31-0565428	501 (c) (3)	18,135				Donor Designated
Vision 2015 50 E River Center Blvd Covington, KY 41011	31-1489316	501 (c) (3)	25,000				Program Oper Cost
Visiting Nurse Association of Greater Cincinnati & Northern Kentucky 2400 Reading Road Cincinnati, OH 45202	31-0536716	501 (c) (3)	2,000				Donor Designated

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
Visiting Nurse Association of Greater Cincinnati & Northern Kentucky 2400 Reading Road Cincinnati, OH 45202	31-0536716	501 (c) (3)	815,000				Program Oper Cost
Volunteers of America Mid-States 570 South Fourth Street Louisville, KY 40202	61-0480950	501 (c) (3)	95,000				Program Oper Cost
Welcome House of Northern Kentucky Inc 205 Pike Street Covington, KY 41011	61-1020382	501 (c) (3)	22,802				Donor Designated

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
Welcome House of Northern Kentucky Inc 205 Pike Street Covington, KY 41011	61-1020382	501 (c) (3)	169,103				Program Oper Cost
Wesley Community Services 2091 Radcliff Drive Cincinnati, OH 45204	31-1709022	501 (c) (3)	52,553				Program Oper Cost
Women Helping Women 215 East Ninth Street Cincinnati, OH 45202	31-0864991	501 (c) (3)	105,000				Program Oper Cost

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
Women's Crisis Center 3580 Hargrave Drive Hebron, KY 41048	61-0908752	501 (c) (3)	265,000				Program Oper Cost
Working in Neighborhoods 1814 Dreman Avenue Cincinnati, OH 45223	31-0962007	501 (c) (3)	74,929				Program Oper Cost
Working in Neighborhoods 1814 Dreman Avenue Cincinnati, OH 45223	31-0962007	501 (c) (3)	2,000				Donor Designated

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
XavierCommunity Building Institute 3800 Victory Pkwy Cincinnati, OH 45207	31-0537516	501 (c) (3)	200,000				Community Collaboration
XavierCommunity Building Institute 3800 Victory Pkwy Cincinnati, OH 45207	31-0537516	501 (c) (3)	20,000				Donor Designated
YMCA of Greater Cincinnati 1105 Elm Street Cincinnati, OH 45202	31-0537178	501 (c) (3)	790,860				Program Oper Cost

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
Youth Encouragement Services Inc 11636 County Farm Road Aurora, IN 47001	31-0991515	501 (c) (3)	11,172				Program Oper Cost
YWCA of Greater Cincinnati 898 Walnut Street Cincinnati, OH 45202	31-0537518	501 (c) (3)	858,277				Program Oper Cost
YWCA of Hamilton Ohio 244 Dayton Street Hamilton, OH 45011	31-0537167	501 (c) (3)	20,580				Program Oper Cost

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

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

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

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of Greater Cincinnati

Employer identification number

31-0537502

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

- b** If any of the boxes 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.
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes," on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes," on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

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

For each individual whose compensation must be reported 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

(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
		Base (i) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Mr Robert C Reifsnyder President/CEO	(i)	339,183	17,000	32,975	20,538	26,211	435,907	0
	(ii)	0	0	0	0	0	0	0
2 Ms Yvonne Washington Executive Vice President / COO	(i)	238,414	0	4,530	19,382	23,860	286,186	0
	(ii)	0	0	0	0	0	0	0
3 Ms Carol Aquino Vice President Marketing	(i)	156,145	0	2,818	12,284	8,579	179,826	0
	(ii)	0	0	0	0	0	0	0
4 Mr Christopher Martin Vice President Development	(i)	156,682	0	643	11,272	22,338	190,935	0
	(ii)	0	0	0	0	0	0	0
5 Ms Margaret Hulbert VP Strategic Res & Pub Policy	(i)	129,583	0	2,321	10,889	22,704	165,497	0
	(ii)	0	0	0	0	0	0	0
6 Ms Jill Johnson Vice President Finance & Operations	(i)	142,755	0	835	11,222	8,914	163,726	0
	(ii)	0	0	0	0	0	0	0
7 Mr Ross Meyer Vice President Community Impact	(i)	127,451	0	264	5,880	25,334	158,929	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 3 REVIEW OF COMPENSATION	<p>United Way of Greater Cincinnati (UWGC) used the following process for determining the compensation of officers, key employees and the highest compensated employees Merit Pool, Salary Ranges, Compensation Policy - The Human Resources (HR) Committee utilized data gathered in the fall of 2015 from reliable compensation sources to prepare a recommendation for a merit pool based on projected base pay movement in the competitive market, to confirm current executive salary ranges for the President/CEO (President), Executive Vice President/COO (EVP/COO) and the Vice Presidents, and to review the appropriateness of current non-executive salary ranges relative to market trending. The committee used data from * Employers Resource Association's (ERA) Wage and Salary Adjustment Survey, * projected base pay increases from United Ways similar in size and operating structure to UWGC, * a United Way Worldwide (UWW) compensation survey of the top six executives from seventeen comparable United Ways, and * national studies from World at Work, Towers Watson, The Conference Board, Hay Group and Aon Hewitt. The HR Committee also reviewed UWGC's Compensation Policy recommending some minor verbiage change. The merit pool and Compensation Policy were presented and approved by the Accountability & Services (A&S) Cabinet as a first-level review, and then by the Executive Compensation Committee (ECC) of the Board of Directors Executive Compensation Recommendations - The President presented to the ECC recommendations and performance ratings for the EVP/COO and each of the Vice Presidents. These were approved by the ECC. This occurs annually, typically in February. Each year, the President works with the Board chair and the Executive Committee of the Board to establish annual performance goals and objectives. Once established, the President's performance is monitored by the Executive Committee. At the conclusion of the rating period, the Executive Committee is surveyed, and an overall performance rating is prepared for the President. This information is presented to the Executive Committee, who conducts an executive session during a regular meeting where they discuss and evaluate the annual performance of the President. The determination of the President's annual compensation (and bonus, if applicable) is managed by the ECC. Specifically, comparative data was obtained for the President's compensation. The ECC utilized data gathered in the last quarter of 2014 from reliable compensation sources as a benchmark in determining the President's salary relative to the competitive market. The committee used data from * Employers Resource Association's (ERA) Executive Compensation Report, * UWW Human Capital Study on executive compensation, and * A UWW compensation survey of the top six executives from seventeen comparable United Ways. By assessing established performance measures and results achieved, and using competitive executive compensation data, the ECC prepares a recommendation for the President's total compensation package, which is then submitted to the Executive Committee for final approval. Meeting notes are taken by the chair of the HR Committee to document all discussion and recommendations made. These meeting notes are prepared and signed by the chair of the Board of Directors who also serves as the chair of the ECC. The recommendations of the ECC are presented and discussed at the next regularly scheduled meeting of the ECC in an executive session from which staff is excused. The Executive Committee meeting occurs annually, typically in March.</p>

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

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.

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization: United Way of Greater Cincinnati

Employer identification number: 31-0537502

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

Table with 5 columns: (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

Table with 10 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization? (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (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) MR THEODORE H TORBECK	BOARD MEMBER	127,607	TELEPHONE SERVICE		No
(2) DR KAREN BANKSTON	BOARD MEMBER	150,000	COMM RESEARCH COLLABORATION		No
(3) DR SANTA J ONO	BOARD MEMBER	150,000	COMM RESEARCH COLLABORATION		No

Part V Supplemental Information

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

Return Reference	Explanation
Schedule L, Part IV BUSINESS TRANSACTIONS WITH INTERESTED PERSONS	MR THEODORE H TORBECK IS THE PRESIDENT AND GENERAL MANAGER OF CINCINNATI BELL, INC DR KAREN BANKSTON IS THE ASSOCIATE DEAN OF UNIVERSITY OF CINCINNATI DR SANTA J ONO IS THE PRESIDENT OF UNIVERSITY OF CINCINNATI

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of Greater Cincinnati

Employer identification number
31-0537502

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	324	2,428,460	Market value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		Yes	No
				No
b If "Yes," describe the arrangement in Part II				
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		Yes	No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?			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 III 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, Line 9	The number of contributions in Part I, Column (B) includes the number of noncash contributions made to UWGC
Schedule M, Part I Explanations of reporting method for number of contributions	Securities - Publicly traded Number of Contributors

Schedule M (Form 990) (2015)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2015

**Open to Public
Inspection**

Name of the organization
United Way of Greater Cincinnati

Employer identification number

31-0537502

Return Reference	Explanation
Form 990, Part I, Line 6 Total Number of Volunteers	UWGC VOLUNTEERS FOR 2015 WERE TRACKED ON THE UWGC VOLUNTEER CONNECTION DATABASE AND INCLUDE BOARD MEMBERS, CABINET/COMMITTEE MEMBERS, CAMPAIGN AMBASSADORS, EMPLOYEE CAMPAIGN COORDINATORS, OTHER CAMPAIGN VOLUNTEERS, COMMUNITY IMPACT VOLUNTEERS, PUBLIC POLICY VOLUNTEERS, DIRECT SERVICE VOLUNTEERS, AND DAYS OF ACTION VOLUNTEERS

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 1,681,586 including grants of \$ 0)(Revenue \$ 26,300) DIRECT SERVICES DIRECT SERVICES ARE SERVICES PROVIDED BY UWGC, SUCH AS UNITED WAY 211 AND THE VOLUNTEER CONNECTION UNITED WAY 211 LINKS PEOPLE TO SERVICES AND VOLUNTEER OPPORTUNITIES UNITED WAY 211 IS AVAILABLE 24 HOURS A DAY , SEVEN DAYS A WEEK TO PEOPLE IN HAMILTON, CLERMONT, BROWN AND BUTLER COUNTIES IN OHIO, BOONE, KENTON, CAMPBELL AND GRANT COUNTIES IN KENTUCKY , AND DEARBORN, OHIO, JEFFERSON, RIPLEY AND SWITZERLAND COUNTIES IN INDIANA THE VOLUNTEER CONNECTION STRIVES TO INCREASE THE EFFECTIVENESS AND PARTICIPATION OF ALL SEGMENTS OF VOLUNTEER RESOURCES THROUGH RECRUITMENT, TRAINING, EDUCATION AND RECOGNITION

Return Reference	Explanation
Form 990, Part IV, Line 28c CHECKLIST OF REQUIRED SCHEDULES	UWGC BOARD MEMBERS ARE REPRESENTATIVE OF THE COMMUNITY THAT UWGC SERVES. THEREFORE, SEVERAL BOARD MEMBERS HAVE RELATIONSHIPS WITH OTHER ORGANIZATIONS WITH WHICH UWGC DOES BUSINESS. HOWEVER, THESE RELATIONSHIPS ARE APPROPRIATE AS THESE TYPES OF TRANSACTIONS ARE DONE IN THE NORMAL COURSE OF BUSINESS.

Return Reference**Explanation**

Form 990, Part VI, Line 2 Family/business relationships amongst interested persons

David Phillips and Scott Phillips - Family relationship

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	GOVERNING BODY AND MANAGEMENT THE 2015 FORM 990 WAS PREPARED BY THE FINANCE STAFF AND THEN REVIEWED BY THE VICE PRESIDENT, FINANCE & OPERATIONS (VP, F&O), THE EXECUTIVE VICE PRESIDENT/CHIEF OPERATING OFFICER (EVP/COO), THE ACCOUNTABILITY AND SERVICE CABINET, AND BKD, LLP, UWGC'S AUDIT FIRM A LINK TO UWGC'S WEBSITE PROVIDED ACCESS TO AN ELECTRONIC DRAFT OF THE FORM 990 TO THE BOARD FOR THEIR REVIEW PRIOR TO THE FORM 990 FILING QUESTIONS OR COMMENTS FROM BOARD MEMBERS REGARDING THE FORM 990 WERE DIRECTED TO THE VP, F&O, OR TO THE EVP/COO

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	POLICIES UWGC STAFF AND VOLUNTEERS ARE REQUIRED TO ACKNOWLEDGE THAT THEY HAVE RECEIVED AND READ THE UWGC CODE OF ETHICS (CODE) AND ITS REQUIREMENTS AND THAT THEY ARE RESPONSIBLE FOR ADHERING TO THE PRINCIPLES AND STANDARDS OF THE CODE. THEY CONFIRM THAT THEY HAVE CONDUCTED THEMSELVES IN ACCORD WITH THE PRINCIPLES AND STANDARDS OF THE CODE. THE CERTIFICATION PROCESS IS MANDATORY FOR UWGC STAFF AND COUNCIL, CABINET/COMMITTEE AND BOARD MEMBERS. MEMBERS OF THE BOARD AND UWGC STAFF ARE REQUESTED TO ANNUALLY FILE WITH THE ETHICS OFFICER (EVP/COO) A DISCLOSURE OF ALL KNOWN POTENTIAL CONFLICTS OF INTEREST. THE ETHICS OFFICER REVIEWS THESE DISCLOSURES, NOTES ANY POTENTIAL CONFLICTS, REQUESTS ADDITIONAL INFORMATION AND/OR DISCUSSES THE POTENTIAL CONFLICT WITH THE INDIVIDUAL, IF NECESSARY. IF A CONFLICT (OR A POTENTIAL CONFLICT) ARISES IN ANY MATTER BEFORE THE BOARD, IF THEY ARE BOARD MEMBERS, OR ANY COMMITTEE UPON WHICH THEY SERVE, STAFF/VOLUNTEERS SHOULD DISCLOSE THIS AND REFRAIN FROM VOTING IN CONNECTION WITH SUCH MATTER. SUCH KNOWN CONFLICTS WOULD INCLUDE BOARD MEMBERSHIP/OFFICER POSITION ON UWGC FUNDED AGENCIES OR OTHER FUNDED PROGRAMS / COLLABORATIONS.

Return Reference	Explanation
<p>Form 990, Part VI, Line 15a Process to establish compensation of top management official</p>	<p>POLICIES UWGC used the following process for determining the compensation of officers, key employees and the highest compensated employees Merit Pool, Salary Ranges, Compensation Policy - The Human Resources (HR) Committee utilized data gathered in the fall of 2014 from reliable compensation sources to prepare a recommendation for a merit pool based on projected base pay movement in the competitive market, to confirm current executive salary ranges for the President/CEO (President), Executive Vice President/COO (EVP/COO) and the Vice Presidents, and to review the appropriateness of current non-executive salary ranges relative to market trending The committee used data from * Employers Resource Association's (ERA) Wage and Salary Adjustment Survey, * projected base pay increases from United Ways similar in size and operating structure to UWGC, * a United Way Worldwide (UWW) compensation survey of the top six executives from seventeen comparable United Ways, and * national studies from World at Work, Towers Watson, , The Conference Board, Hay Group and Aon Hewitt The HR Committee also reviewed UWGC's Compensation Policy recommending some minor verbiage change The merit pool and Compensation Policy were presented and approved by the Accountability & Services (A&S) Cabinet as a first-level review, and then by the Executive Compensation Committee (ECC) of the Board of Directors Executive Compensation Recommendations - The President presented to the ECC recommendations and performance ratings for the EVP/COO and each of the Vice Presidents These were approved by the ECC This occurs annually, typically in February Each year, the President works with the Board chair and the Executive Committee of the Board to establish annual performance goals and objectives Once established, the President's performance is monitored by the Executive Committee At the conclusion of the rating period, the Executive Committee is surveyed, and an overall performance rating is prepared for the President This information is presented to the Executive Committee, who conducts an executive session during a regular meeting where they discuss and evaluate the annual performance of the President The determination of the President's annual compensation (and bonus, if applicable) is managed by the ECC Specifically, comparative data was obtained for the President's compensation The ECC utilized data gathered in the last quarter of 2014 from reliable compensation sources as a benchmark in determining the President's salary relative to the competitive market The committee used data from * Employers Resource Association's (ERA) Executive Compensation Report, * UWW Human Capital Study on executive compensation, and * A UWW compensation survey of the top six executives from seventeen comparable United Ways By assessing established performance measures and results achieved, and using competitive executive compensation data, the ECC prepares a recommendation for the President's total compensation package, which is then submitted to the Executive Committee for final approval Meeting notes are taken by the chair of the HR Committee to document all discussion and recommendations made These meeting notes are prepared and signed by the chair of the Board of Directors who also serves as the chair of the ECC The recommendations of the ECC are presented and discussed at the next regularly scheduled meeting of the ECC in an executive session from which staff is excused The Executive Committee meeting occurs annually, typically in March</p>

Return Reference**Explanation**

Form 990, Part VI, Line 15b Process to establish compensation of other employees

SEE the Schedule O disclosure for Form 990, Part VI, Line 15A

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	DISCLOSURE UWGC'S MOST RECENTLY AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE AT WWW.UWGC.ORG. UWGC MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a STATEMENT OF COMPENSATION	ROBERT C REIFSNYDER'S AVERAGE HOURS WORKED PER WEEK FOR UWGC SERVICES, INC AND UNITED WAY OF GREATER CINCINNATI FOUNDATION WAS 1 HOUR FOR EACH YVONNE G WASHINGTON'S AVERAGE HOURS WORKED PER WEEK FOR UWGC SERVICES, INC AND UNITED WAY OF GREATER CINCINNATI FOUNDATION WAS 1 HOUR FOR EACH JILL JOHNSON'S AVERAGE HOURS WORKED PER WEEK FOR UWGC SERVICES, INC AND UWGC FOUNDATION WAS 2 HOURS FOR EACH

Return Reference	Explanation
Form 990, Part VII, Section A OFFICERS, DIRECTORS, TRUSTEES, OR KEY EMPLOYEES	UWGC BOARD MEMBERS WHOSE TERM EXPIRED IN APRIL 2015 OR WHO LEFT THE BOARD FOR VARIOUS REASONS DURING 2015 ARE AS FOLLOWS 1) Mr John S Dubis 2) Mr Michael J Laatsch 3) Mr Victor A Needham, III 4) Ms Jacquelyn D Phillips 5) Mr J Michael Robinson 6) Mr Brent R Seelmeyer 7) Mr Douglas E Sizemore

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Service Revenue - Total Revenue 113175, Related or Exempt Function Revenue 113175, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 ,

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Market Value Change in Beneficial Interest - -78882, Market Value Change in Interest Rate Swap Agreement - 88236, Provision for Uncollectible Pledges - 993754,

Return Reference	Explanation
CEO / CFO Financial Statement Certification	ROBERT C REIFSNYDER, PRESIDENT AND CEO AND JILL JOHNSON, CFO, CERTIFY THAT THEY HAVE REVIEWED THE AUDITED FINANCIAL STATEMENTS AND RELATED IRS FORM 990 OF UNITED WAY OF GREATER CINCINNATI (UWGC) BASED ON THEIR KNOWLEDGE, THESE FINANCIAL STATEMENTS DO NOT CONTAIN ANY UNTRUE STATEMENT OF MATERIAL FACT OR OMIT ANY MATERIAL FACTS NECESSARY WHICH WOULD MAKE THE STATEMENTS MISLEADING AND, BASED ON THEIR KNOWLEDGE, THESE FINANCIAL STATEMENTS AND OTHER FINANCIAL INFORMATION INCLUDED IN THESE REPORTS, FAIRLY PRESENT, IN ALL MATERIAL RESPECTS, THE FINANCIAL CONDITION, RESULTS OF OPERATION AND CASH FLOWS OF UWGC AS OF, AND FOR THE YEAR ENDED DECEMBER 31, 2015

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

**Open to Public
Inspection**

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

▶ **Attach to Form 990.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of Greater Cincinnati

Employer identification number

31-0537502

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) UNITED WAY OF GREATER CINCINNATI FOUNDATION 2400 READING ROAD CINCINNATI, OH 45202 31-1064812	HUMAN SERVICE	OH	501(c)(3)		UWGC	Yes	
(2) UWGC SERVICES INC 2400 READING ROAD CINCINNATI, OH 45202 26-3471616	BUILDING OPS	OH	501(c)(3)		UWGC	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER (1) TRUST (1) 425 Walnut Street Cincinnati, OH 45202	GRANT MAKING	IL	NA	Trust				Yes	

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

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

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

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a	Yes	
1b	Yes	
1c	Yes	
1d	Yes	
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k	Yes	
1l	Yes	
1m		No
1n	Yes	
1o	Yes	
1p	Yes	
1q	Yes	
1r	Yes	
1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

Part VII Supplemental Information

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

Return Reference**Explanation**

Additional Data

Software ID: 15000238
Software Version: 2015v2.1
EIN: 31-0537502
Name: United Way of Greater Cincinnati

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1) UWGC Services Inc	B	982,779	Book Value
(1) United Way of Greater Cincinnati Foundation	C	939,300	Book Value
(2) UWGC Services Inc	D	9,014,273	Book Value
(3) UWGC Services Inc	K	427,917	Book Value
(4) United Way of Greater Cincinnati Foundation	L	265,354	Book Value
(5) United Way of Greater Cincinnati Foundation	O	212,707	Book Value
(6) UWGC Services Inc	R	169,300	Book Value