

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

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 \$ 249,479,956

F Name and address of principal officer: Ross Meyer, 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

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 if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	61
4 Number of independent voting members of the governing body (Part VI, line 1b)	59
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	166
6 Total number of volunteers (estimate if necessary)	5,222
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	59,500,934	47,629,605
9 Program service revenue (Part VIII, line 2g)	1,393,481	916,573
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	203,405	243,731
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	173,069	144,707
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	61,270,889	48,934,616
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	41,955,368	30,913,745
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,716,107	13,119,016
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,197,965		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,942,503	6,650,405
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	61,613,978	50,683,166
19 Revenue less expenses Subtract line 18 from line 12	-343,089	-1,748,550

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	78,001,132	68,860,760
21 Total liabilities (Part X, line 26)	40,854,330	33,629,813
22 Net assets or fund balances Subtract line 21 from line 20	37,146,802	35,230,947

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: 2019-11-15
 Ross Meyer Interim President/CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P00961884
 Firm's name ▶ BKD LLP Firm's EIN ▶ 44-0160260
 Firm's address ▶ 312 Walnut St Suite 3000 Phone no (513) 621-8300
 Cincinnati, OH 45202

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 \$	30,378,997	including grants of \$	22,990,880	(Revenue \$	0)
	See Additional Data						

4b	(Code)	(Expenses \$	7,922,865	including grants of \$	7,922,865	(Revenue \$	180,564)
	See Additional Data						

4c	(Code)	(Expenses \$	2,268,736	including grants of \$		(Revenue \$	190,463)
	See Additional Data						

	(Code)	(Expenses \$	385,567	including grants of \$	0	(Revenue \$	726,110)
	CENTRAL SERVICES Central Services include self-supporting programs which serve UWGC's operating divisions and other non-profit organizations. These fee-producing programs include group employee benefits administration, building and grounds management and accounting						

4d	Other program services (Describe in Schedule O)	(Expenses \$	385,567	including grants of \$		(Revenue \$	726,110)
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4e	Total program service expenses ▶		40,956,165				
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Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS requirements.

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 []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	166		
b	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)	2b		Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b			
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)?	4a			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?	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7 Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8 Sponsoring organizations maintaining donor advised funds.					
	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10 Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N	15			No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16			

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

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (61); 1b Enter the number of voting members included in line 1a, above, who are independent (59); 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? (Yes); 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.)

Table with 3 columns: Question, Yes, No. Rows include: 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 IN, KY
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply
[checked] Own website [] Another's website [checked] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, address, and telephone number of the person who possesses the organization's books and records
Dawn Reynolds 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

(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										

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

Table with 6 main columns: (A) Name and Title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Summary rows for Sub-Total, Total from continuation sheets, and Total (add lines 1b and 1c) with values 1,800,844, 0, and 192,433.

Section 2: Total number of individuals who received more than \$100,000 of reportable compensation. Includes questions 3, 4, and 5 regarding compensation reporting.

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like StratusLive LLC, UPIC Solutions, etc.

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 8

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	200,576			
	b Membership dues	1b				
	c Fundraising events	1c	161,205			
	d Related organizations	1d	3,637,800			
	e Government grants (contributions)	1e	63,117			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	43,566,907			
	g Noncash contributions included in lines 1a - 1f \$ _____		1,971,479			
	h Total. Add lines 1a-1f			47,629,605		

Program Service Revenue			Business Code				
	2a RENTAL INCOME FROM AGENCIES		531120	285,679	285,679		
	b CENTRAL SERVICES-ACCOUNTING FEES		561499	116,950	116,950		
	c CENTRAL SERVICES-ADMINISTRATIVE SERVICES		561000	138,631	138,631		
	d CENTRAL SERVICES-CITY HUMAN SERVICES		900099	93,774	93,774		
	e CENTRAL SERVICES-CINCINNATI PRESCHOOL PROMISE		900099	125,000	125,000		
	f All other program service revenue			156,539	156,539	0	0
	g Total. Add lines 2a-2f			916,573			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			358,390			358,390
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)	0	0				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses	200,346,566					
	c Gain or (loss)	200,461,225					
	d Net gain or (loss)	-114,659	0	-114,659			-114,659
	8a Gross income from fundraising events (not including \$ 161,205 of contributions reported on line 1c) See Part IV, line 18	a	37,801				
	b Less direct expenses	b	83,815				
	c Net income or (loss) from fundraising events			-46,014			-46,014
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a	998				
	b Less cost of goods sold	b	300				
	c Net income or (loss) from sales of inventory			698			698
11a Convening Center Rental	Miscellaneous Revenue	Business Code	900099	1,500		1,500	
b Donor Designation Processing Fees			900099	180,564	180,564		
c Miscellaneous Income			900099	7,959		7,959	
d All other revenue				0	0	0	
e Total. Add lines 11a-11d				190,023			
12 Total revenue. See Instructions				48,934,616	1,097,137	0	
						207,874	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	30,913,745	30,913,745		
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, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	1,187,224	307,476	729,212	150,536
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.	7,200,554	3,891,094	1,273,655	2,035,805
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	2,617,163	1,368,711	523,088	725,364
9 Other employee benefits.	1,483,022	762,805	361,950	358,267
10 Payroll taxes.	631,053	335,391	130,599	165,063
11 Fees for services (non-employees):				
a Management.				
b Legal.	46,055		46,055	
c Accounting.	72,750		72,750	
d Lobbying.	57,068		57,068	
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	2,024,240	1,562,272	144,941	317,027
12 Advertising and promotion.	134,606	57,205	5,384	72,017
13 Office expenses.	326,025	47,386	136,504	142,135
14 Information technology.	1,278,973	591,956	477,946	209,071
15 Royalties.				
16 Occupancy.	509,798	115,627	178,960	215,211
17 Travel.	130,699	78,177	21,231	31,291
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	334,575	173,247	45,980	115,348
20 Interest.	481	248	109	124
21 Payments to affiliates.	526,263	270,973	119,409	135,881
22 Depreciation, depletion, and amortization.	662,927	341,362	150,405	171,160
23 Insurance.	141,254	51,264	17,406	72,584
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	237,500			237,500
b MISCELLANEOUS EXPENSE	167,191	87,226	36,384	43,581
c				
d				
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e.	50,683,166	40,956,165	4,529,036	5,197,965
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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	500	1	500
	2 Savings and temporary cash investments	4,108,631	2	2,859,583
	3 Pledges and grants receivable, net	40,160,502	3	32,167,213
	4 Accounts receivable, net	1,974,087	4	4,175,927
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
	7 Notes and loans receivable, net	0	7	400,000
	8 Inventories for sale or use		8	30,634
	9 Prepaid expenses and deferred charges	229,758	9	262,371
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	17,498,441		
	b Less accumulated depreciation	4,807,810		
	11 Investments—publicly traded securities	17,226,251	11	15,323,503
	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	1,072,320	15	950,398
16 Total assets. Add lines 1 through 15 (must equal line 34)	78,001,132	16	68,860,760	
Liabilities	17 Accounts payable and accrued expenses	3,580,718	17	4,713,863
	18 Grants payable	36,661,791	18	28,080,190
	19 Deferred revenue	2,086	19	0
	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	0
	23 Secured mortgages and notes payable to unrelated third parties	15,601	23	18,787
	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	594,134	25	816,973
	26 Total liabilities. Add lines 17 through 25	40,854,330	26	33,629,813
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	27,467,294	27	28,220,985
	28 Temporarily restricted net assets	8,607,188	28	6,059,564
	29 Permanently restricted net assets	1,072,320	29	950,398
	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	37,146,802	33	35,230,947	
34 Total liabilities and net assets/fund balances	78,001,132	34	68,860,760	

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	48,934,616
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,683,166
3	Revenue less expenses Subtract line 2 from line 1	3	-1,748,550
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,146,802
5	Net unrealized gains (losses) on investments	5	-45,384
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	-121,921
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	35,230,947

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual 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
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** 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
- 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 31-0537502

Name: United Way of Greater Cincinnati

Form 990 (2018)

Form 990, Part III, Line 4a:

Community Impact Solutions See Schedule O

Form 990, Part III, Line 4b:

DONOR DESIGNATIONS See Schedule O

Form 990, Part III, Line 4c:

DIRECT SERVICES See Schedule O

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			
Ross Meyer	59 0	X	X				151,995	0	27,085	
Interim President/CEO, See Sch J Part III	1 0									
Timothy Elsbrock	3 0	X	X				0	0	0	
Interim Board Chair, New April 2018										
Tillie Hidalgo Lima	1 0	X	X				0	0	0	
Secretary										
Carolyn Micheli	2 0	X	X				0	0	0	
Vice Chair-Board, Marketing										
Mary Miller	2 0	X	X				0	0	0	
Vice Chair-Board, Community Impact										
Michael Johnson	59 0	X	X				405,451	0	11,490	
President/CEO, See Sch J Part III	1 0									
Julia Poston	3 0	X	X				0	0	0	
Board Chair, Left Nov 2018										
Robert Reifsnyder	70 0	X	X				194,481	0	16,470	
President/CEO, See Sch J Part III	1 0									
Carl Satterwhite	1 0	X					0	0	0	
Immediate Past Chair										
Marcia Voorhis Andrew	2 0	X					0	0	0	
Board Member, Chair Middletown Area										

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			
Kasey Bond Board Member, Chair NKY Area	2 0	X						0	0	0
Alicia Bond-Lewis Board Member, New April 2018	1 0	X						0	0	0
Jay Brewer Board Member, New April 2018	1 0	X						0	0	0
William Butler Board Member	1 0	X						0	0	0
Kim Chiodi Board Member	1 0	X						0	0	0
Mark Clement Board Member	1 0	X						0	0	0
Brian Coley MD FACR Board Member	1 0	X						0	0	0
Garren Colvin Board Member	1 0	X						0	0	0
Michael Comer Vice Chair, Board - Accountability & Services	2 0	X						0	0	0
Alfonso Cornejo 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	Instructional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brian Cox Board Member	10	X						0	0	0
David Faulk Board Member	10	X						0	0	0
Fernando Figueroa Board Member	10	X						0	0	0
Michael Filomena Board Member	10	X						0	0	0
David Gooch Board Member	10	X						0	0	0
Tracey Grabowski Board Member	10	X						0	0	0
Melvin Gravely PhD Board Member	10	X						0	0	0
Trey Grayson Board Member	10	X						0	0	0
Kimberly Halbauer Board Member	10	X						0	0	0
Adam Hall Board Member, New April 2018	10	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			
Deborah Hayes Board Member, New April 2018	10	X						0	0	0
Gary Heiman Board Member	10	X						0	0	0
Kip Heekin Board Member, New April 2018	10	X						0	0	0
Gary Huffman Board Member	20	X						0	0	0
Mark Jahnke Board Member	10	X						0	0	0
Renita Jones-Street Board Member	10	X						0	0	0
Eric Kearney Board Member	10	X						0	0	0
Roni Luckenbill Board Member, Chair Leadership Council of Nonprofits	20	X						0	0	0
Anne Lynch Board Member	10	X						0	0	0
Candace McGraw Board Member	10	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			
Inga McGlothlin Board Member	1 0	X						0	0	0
Peter McLinden Board Member, Chair, Community Services	2 0	X						0	0	0
Jill Meyer Board Member, New April 2018	1 0	X						0	0	0
Jeff O'Neil Board Member	1 0	X						0	0	0
Neville Pinto PhD Board Member, New April 2018	1 0	X						0	0	0
David Phillips Board Member	1 0	X						0	0	0
Scott Phillips Board Member	1 0	X						0	0	0
Monica Posey EdD Board Member	1 0	X						0	0	0
R Michael Prescott Board Member, New April 2018	1 0	X						0	0	0
Rebecca Rahschulte PhD Board Member, Chair D&O Counties, New April 2018	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Instructional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brian Robinson Board Member, New April 2018	10	X						0	0	0
Sean Rugless Board Member	10	X						0	0	0
Jim Scott Board Member	10	X						0	0	0
Charles Session Jr Board Member	10	X						0	0	0
Steven Shifman Board Member	10	X						0	0	0
Heidi Shore Board Member	10	X						0	0	0
James Sowar Board Member	10	X						0	0	0
Cary Sierz Board Member, New April 2018	10	X						0	0	0
Gerald Sparkman Board Member, New April 2018	10	X						0	0	0
Paige Stephens Board Member, New April 2018	10	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			
Kenneth Stecher Board Member	1 0	X						0	0	0
Eddie Tyner Board Member, New April 2018	1 0	X						0	0	0
Matthew Van Sant Board Member, Chair Eastern Area	2 0	X						0	0	0
Thomas Vaughan Board Member, Chair Volunteer Connection	2 0	X						0	0	0
Shakila Ahmad Board Member, Left April 2018	1 0	X						0	0	0
Patrica Baker Board Member, Chair D&O Counties, Left April 2018	2 0	X						0	0	0
Steve Cruse Board Member, Left April 2018	1 0	X						0	0	0
Christopher Froman Board Member, Left April 2018	1 0	X						0	0	0
Monica Garnes Board Member, Left April 2018	1 0	X						0	0	0
Kay Geiger Board Member, Co-Chair Regional Public Policy Council, Left April 2018	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Julie Highley Board Member, Left April 2018	1 0	X						0	0	0
Molly North Board Member, Left April 2018	1 0	X						0	0	0
Lisa O'Brien Board Member, Chair, UWGC Foundation, Left April 2018	1 0	X						0	0	0
Mary Stagaman Board Member, Left April 2018	1 0	X						0	0	0
Theodore Torbeck Board Member, Left April 2018	1 0	X						0	0	0
Karen Bankston See Schedule O	50 0	X						101,055	0	13,092
Jill Johnson SVP, Finance & Operations	49 0				X			163,814	0	15,408
Christina McVeigh SVP/Chief Strategy Officer	50 0				X			171,604	0	29,426
Margaret Hulbert SVP, Strategic Res & Pub Policy	64 0					X		133,880	0	30,182
Chris Martin SVP, Development	55 0					X		135,060	0	21,934

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			
Margaret Clark Director, Every Child Succeeds	50 0					X		124,186	0	6,372
Teresa Hoelle SVP, Marketing	55 0					X		110,059	0	18,219
Anthony Neary Director, Marketing & Interim SVP, Marketing	45 0					X		109,259	0	2,755

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018

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 12, check only one box)

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

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

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	62,750,144	61,677,581	60,045,401	59,500,934	47,629,605	291,603,665
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	62,750,144	61,677,581	60,045,401	59,500,934	47,629,605	291,603,665
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)						13,815,441
6 Public support. Subtract line 5 from line 4						277,788,224

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	62,750,144	61,677,581	60,045,401	59,500,934	47,629,605	291,603,665
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,067,239	1,029,078	772,319	358,448	358,390	3,585,474
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.)	121,696	148,345	15,672,549	172,847	190,023	16,305,460
11 Total support. Add lines 7 through 10						311,494,599

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	89.18 %
15 Public support percentage for 2017 Schedule A, Part II, line 14	15	89.63 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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** ►

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
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.		
	1		
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).		
	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.		
	3a		
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.		
	3b		
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.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
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.		
	4b		
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.		
	4c		
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).		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
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 I of Schedule L (Form 990 or 990-EZ).		
	8		
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 .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
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.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
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? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

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

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

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - MISCELLANEOUS, COLUMN A - 121696 0, COLUMN B - 148345 0, COLUMN C - 156501 0, COLUMN D - 172847 0, COLUMN E - 190023 0, COLUMN F - 789412 0, DESCRIPTION - GAIN ON FORGIVENESS OF DEBT, COLUMN A - , COLUMN B - , COLUMN C - 12117200 0, COLUMN D - 0 0, COLUMN E - , COLUMN F - 12117200 0, DESCRIPTION - GAIN ON NEW MARKET TAX CREDITS, COLUMN A - , COLUMN B - , COLUMN C - 3398848 0, COLUMN D - 0 0, COLUMN E - , COLUMN F - 3398848 0,

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018
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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 (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 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

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

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	43,595	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	142,973	
c	Total lobbying expenditures (add lines 1a and 1b)	186,568	
d	Other exempt purpose expenditures	40,769,597	
e	Total exempt purpose expenditures (add lines 1c and 1d)	40,956,165	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	0
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) 2015	(b) 2016	(c) 2017	(d) 2018	(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	224,680	195,478	208,584	186,568	815,310
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	48,513	37,905	41,880	43,595	171,893

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

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

	(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?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		

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 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 2018, United Way of Greater Cincinnati recorded expenditures of \$285,667 for the Public Policy and Government Relations function This amount provided salaries for approximately 16 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 \$85,700 was spent on lobbying and no more than 30% of that amount, or \$25,710 was spent on grassroots lobbying In 2018, 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 two states and eight county regions Staff lobbied elected and appointed officials on the following issues * At the federal level, we supported education, workforce, health and human services funding, the earned income tax credit and appropriate accountability standards for nonprofit organizations * In Ohio and Kentucky, we worked with the state administrations 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 county and city Governments to create public-private partnerships for the efficient, effective delivery of health and human services Through service contracts, we spent * \$37,200 to Top Shelf Lobby LLC to advocate for early childhood education in Kentucky Of that amount, no more than \$18,600 was spent on lobbying * \$16,668 to Vorys Advisors, LLC for early childhood education and home visiting in Ohio Of that amount, no more than \$11,668 was spent on lobbying We made the following allocations to nonprofit organizations for education, advocacy or lobbying about public sector policies or funding * \$29,000 to Council for a Strong America to support ReadyNation advocacy on behalf of early care and education in Ohio and on the federal level Of that amount, no more than 20% or \$5,800 was spent on lobbying, and none of the lobbying amount was spent on grassroots lobbying * \$20,000 to Council for a Strong America to support Shepherding the Next Generation advocacy on behalf of early care and education in Kentucky Of that amount, no more than 20% or \$4,000 was spent on lobbying, and no more than 50% of the lobbying amount, or \$2,000, was spent on grassroots lobbying * \$26,000 to Children Inc to advocate on behalf of early care and education in Kentucky Of that amount, no more than 30% or \$7,800 was spent on lobbying, and no more than 20% of the lobbying amount, or \$1,560, was spent on grassroots lobbying * \$125,000 to support Groundwork to advocate on behalf of early care and education in Ohio Of that amount, no more than 20% or \$25,000 was spent on lobbying, and no more than 20% of the lobbying amount, or \$5,000, 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 * \$55,000 to Prichard Committee to advocate on behalf of early care and education in Kentucky Of that amount, no more than 30% or \$16,500 was spent on lobbying, and no more than 20% of the lobbying amount, or \$3,300, was spent on grassroots lobbying * \$20,000 to The Center for Community Solutions for Advocates for Ohio's Future to advocate on behalf of health and human services funding in Ohio Of that amount, none was spent on direct or grassroots lobbying</p>

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

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.

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

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

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

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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	631,007	584,800	592,514	662,883	695,683
b Contributions		0	0	0	0
c Net investment earnings, gains, and losses	-37,561	74,610	23,431	-34,436	179
d Grants or scholarships	29,812	28,403	31,145	35,933	32,979
e Other expenditures for facilities and programs	0	0	0	0	0
f Administrative expenses	0	0	0	0	0
g End of year balance	563,634	631,007	584,800	592,514	662,883

- 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
- | | | |
|--|-------------------|----|
| | Yes | No |
| (i) unrelated organizations | 3a(i) Yes | |
| (ii) related organizations | 3a(ii) Yes | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b Yes | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		476,742		476,742
b Buildings		14,113,146	2,986,980	11,126,166
c Leasehold improvements				
d Equipment		2,531,430	1,505,816	1,025,614
e Other		377,123	315,014	62,109
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				12,690,631

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 _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

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

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

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
AGENCY CUSTODIAL FUND PAYABLE	816,973
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	816,973

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	41,219,746
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-45,384
b	Donated services and use of facilities	2b	375,000
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-121,921
e	Add lines 2a through 2d	2e	207,695
3	Subtract line 2e from line 1	3	41,012,051
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	7,922,565
c	Add lines 4a and 4b	4c	7,922,565
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	48,934,616

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	43,135,601
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	375,000
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	0
e	Add lines 2a through 2d	2e	375,000
3	Subtract line 2e from line 1	3	42,760,601
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	7,922,565
c	Add lines 4a and 4b	4c	7,922,565
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	50,683,166

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

EIN: 31-0537502

Name: United Way of Greater Cincinnati

Supplemental 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

Supplemental Information

Return Reference	Explanation
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

Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	Market Value Change in Beneficial Interest in Trust - -121921

Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Amounts Designated by Contributors - 7922865 Cost of Goods Sold Inventory - -300 -

Supplemental Information

Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Amounts Designated by Contributors - 7922865 Cost of Goods Sold Inventory - -300

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

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2018

**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.

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

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.

Revenue		(a)Event #1	(b) Event #2	(c)Other events	(d)
		Middletown Golf Outing (event type)	CB Golf Outing (event type)	(total number)	Total events (add col (a) through col (c))
1	Gross receipts	45,251	153,755		199,006
2	Less Contributions	27,900	133,305		161,205
3	Gross income (line 1 minus line 2)	17,351	20,450	0	37,801
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	2,824	13,173		15,997
	6 Rent/facility costs	15,790	51,272		67,062
	7 Food and beverages	104			104
	8 Entertainment				
	9 Other direct expenses	652			652
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				83,815
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-46,014

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.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		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 provide any additional information. See instructions.

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

Schedule I (Form 990)

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

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...
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. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 174
3 Enter total number of other organizations listed in the line 1 table 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part II, Line 1(h) Purpose of Grant or Assistance	Purpose of grant or assistance definitions per United Way Worldwide * 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 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
Schedule I, Part II, Line 1(d) Amount of Cash Grant	The remaining distributions not listed in Part II, include designations and other allocations from 2018 that will be paid in 2019 based on amounts collected and grant amounts less than or equal to \$5,000
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	United Way of Greater Cincinnati makes allocation decisions based on impact, alignment, accountability and learning Funded partners report on impact annually, including demographics served and results achieved Annual reports are reviewed by staff and follow-up with the funded partner as needed Allocation decisions are made based on recommendations from a volunteer leadership group, the Impact Cabinet, and are approved annually by the Board of Directors

Additional Data

Software ID: 18007697
Software Version: 2018v3.1
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 2100 Sherman Ave Cincinnati, OH 45212	31-0823634	501 (c) (3)	464,800				Program Operating Cost
Abilities First 4710 Timber Trl Dr Middletown, OH 45044	31-0620685	501 (c) (3)	100,584				Program Operating 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
Adams Brown Co Economic Opportunities 406 West Plum St Georgetown, OH 45121	31-0710683	501 (c) (3)	23,200				Program Operating Cost
Addiction Services Council 2828 Vernon Place Cincinnati, OH 45219	31-0784671	501 (c) (3)	49,600				Program Operating 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
Adopt-A-Class 2153 W 8th St Cincinnati, OH 45204	20-2587299	501 (c) (3)	5,000				Program Operating Cost
American Cancer Society OH Division 5555 Frantz Rd Dublin, OH 43017	13-1788491	501 (c) (3)	110,400				Program Operating 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
American Cancer Society OH Division 5555 Frantz Rd Dublin, OH 43017	13-1788491	501 (c) (3)	43,037				Donor Design General
American Heart Association Grtr Cinti 5211 Madison Rd Cincinnati, OH 45227	13-5613797	501 (c) (3)	45,245				Donor Design General

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
American Lung Assoc Midland States 4050 Executive Park Dr Cincinnati, OH 45241	31-4379531	501 (c) (3)	23,490				Donor Design General
American Red Cross Grtr Cinti-Dayton 2111 Dana Ave 45207 Cincinnati, OH 45207	53-0196605	501 (c) (3)	3,293,600				Community Collaboration

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
Arthritis Fdtn Great Lakes Region 7124 Miami Ave Cincinnati, OH 452432675	58-1341679	501 (c) (3)	30,860				Donor Design General
BAWAC Inc Community Rehabilitation Center 7970 Kentucky Dr Florence, KY 41042	61-0844925	501 (c) (3)	46,400				Program Operating 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
Be Concerned United Ministries 1100 Pike St Covington, KY 41011	61-1071487	501 (c) (3)	10,000				Program Operating Cost
Beacon of Hope 1907 South Street Cincinnati, OH 45204	47-4326461	501 (c) (3)	15,000				Program Operating 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
Beech Acres Parenting Center 6881 Beechmont Ave Cincinnati, OH 45230	31-0536663	501 (c) (3)	95,484				Program Operating Cost
Bethany House Services 1841 Fairmount Ave Cincinnati, OH 45214	31-1101401	501 (c) (3)	69,600				Program Operating 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
Big Brothers Big Sisters of Butler County 1755 S Erie Blvd Hamilton, OH 45011	31-0846147	501 (c) (3)	40,800				Program Operating Cost
Big Brothers Big Sisters of Greater Cincinnati 2400 Reading Rd Cincinnati, OH 45202	31-0577668	501 (c) (3)	262,400				Program Operating 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
Boone County Schools 8330 US Highway 42 Florence, KY 41042	61-6001252	School District	10,000				Program Operating Cost
Boy Scouts of America Dan Beard Council 10078 Reading Rd Cincinnati, OH 45241	31-0536651	501 (c) (3)	357,600				Program Operating 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
Boys & Girls Clubs of Greater Cincinnati 600 Dalton Ave Cincinnati, OH 45203	31-0536965	501 (c) (3)	588,800				Program Operating Cost
Breakthrough Cincinnati 6905 Given Rd Cincinnati, OH 45243	31-1357625	501 (c) (3)	22,400				Program Operating 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
Brighton Center Inc PO Box 325 Newport, KY 41072	61-0673886	501 (c) (3)	1,052,000				Program Operating Cost
Brown County Educational Service Center 9231 Hamer Rd Georgetown, OH 45121	31-1081006	School District	10,000				Program Operating 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
Brown County Helping Hands PO Box 191 Georgetown, OH 45121	31-6084499	501 (c) (3)	18,400				Program Operating Cost
Brown County Senior Citizens Council 505 North Main St Georgetown, OH 45121	51-0166580	501 (c) (3)	57,600				Program Operating Cost

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Camp Joy PO Box 157 Clarksville, OH 45113	31-0672822	501 (c) (3)	16,866				Donor Design General
Cancer Family Care 4790 Red Bank Expressway Cincinnati, OH 45227	31-0805286	501 (c) (3)	7,684				Program Operating Cost

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

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Cancer Family Care 4790 Red Bank Expressway Cincinnati, OH 45227	31-0805286	501 (c) (3)	176,800				Program Operating Cost
Caracole Inc 4138 Hamilton Ave Cincinnati, OH 45223	31-1210524	501 (c) (3)	66,400				Program Operating Cost

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

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Catholic Charities Diocese of Covington 3629 Church St Covington, KY 41015	61-0461728	501 (c) (3)	187,200				Program Operating Cost
Catholic Charities of SouthWestern Ohio 7162 Reading Rd Cincinnati, OH 45237	31-0536968	501 (c) (3)	476,700				Program Operating Cost

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Catholic Charities of SouthWestern Ohio 7162 Reading Rd Cincinnati, OH 45237	31-0536968	501 (c) (3)	36,444				Donor Design General
Center for Chemical Addictions Treatment 830 Ezzard Charles Dr Cincinnati, OH 452142525	31-0792742	501 (c) (3)	77,600				Program Operating Cost

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

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Center for Employment Opportunities 50 Broadway New York, NY 10004	13-3843322	501 (c) (3)	55,200				Program Operating Cost
Center for Great Neighborhoods of Covington 321 W MLK Blvd/12th St Covington, KY 41011	61-0733046	501 (c) (3)	122,100				Program Operating Cost

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Central Clinic 311 Albert Sabin Way Cincinnati, OH 45229	31-1411744	501 (c) (3)	456,800				Program Operating Cost
Central Connections 3907 Central Ave Middletown, OH 450445006	31-1026085	501 (c) (3)	85,600				Program Operating Cost

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Child Focus Inc 551-B Cincinnati-Batavia Pike Cincinnati, OH 45244	31-0952668	501 (c) (3)	320,000				Program Operating Cost
Children Inc 333 Madison Ave Covington, KY 41011	31-0910787	501 (c) (3)	52,000				Community Collaboration

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

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Children Inc 333 Madison Ave Covington, KY 41011	31-0910787	501 (c) (3)	868,800				Program Operating Cost
Children's Law Center 1002 Russell St Covington, KY 41011	61-1167352	501 (c) (3)	14,400				Program Operating Cost

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Churches Active In Northside - CAIN 4230 Hamilton Ave Cincinnati, OH 45223	31-1341556	501 (c) (3)	20,000				Program Operating Cost
Cincinnati Area Senior Services Inc 644 Linn St Cincinnati, OH 45203	31-0825754	501 (c) (3)	223,484				Program Operating Cost

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

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Cincinnati Arts & Technology Center 700 W Pete Rose Way Cincinnati, OH 45203	20-0105431	501 (c) (3)	41,600				Program Operating Cost
Cincinnati Association for the Blind and Visually Impaired 2045 Gilbert Avenue Cincinnati, OH 45202	31-0538511	501 (c) (3)	186,484				Program Operating Cost

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

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Cincinnati Children's Hospital Medical Center 3333 Burnett Ave Cincinnati, OH 452293039	31-0833936	501 (c) (3)	156,000				Program Operating Cost
Cincinnati Children's Hospital Medical Center 3333 Burnett Ave Cincinnati, OH 452293039	31-0833936	501 (c) (3)	3,646				Donor Design General

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

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Cincinnati Early Learning Centers Inc 1301 E McMillan Cincinnati, OH 45206	31-1110503	501 (c) (3)	308,800				Program Operating Cost
Cincinnati Union Bethel 2401 Reading Rd Cincinnati, OH 45202	31-0536655	501 (c) (3)	166,700				Program Operating Cost

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Cincinnati Works 708 Walnut St Cincinnati, OH 45202	31-1656186	501 (c) (3)	294,400				Program Operating Cost
Cincinnati Youth Collaborative 301 Oak St Cincinnati, OH 452192508	31-1204406	501 (c) (3)	59,200				Program Operating Cost

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

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Cincinnati-Hamilton County Community Action Agency 1740 Langdon Farm Rd Cincinnati, OH 452373817	31-6053035	501 (c) (3)	41,600				Program Operating Cost
CincySmiles Foundation 635 West 7th St Cincinnati, OH 452031513	31-0537044	501 (c) (3)	82,400				Program Operating Cost

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Clearinghouse PO Box 478 Aurora, IN 47001	31-1158133	501 (c) (3)	10,000				Program Operating Cost
Clermont County Community Services Inc 3003 Hospital Dr Batavia, OH 45103	31-1111703	501 (c) (3)	131,200				Program Operating Cost

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Clermont Senior Services Inc 2085 James E Sauls Sr Batavia, OH 45103	31-0832354	501 (c) (3)	110,400				Program Operating Cost
Community Building Institute Middletown Inc 800 Lafayette Ave Middletown, OH 45044	46-5205808	501 (c) (3)	327,100				Program Operating Cost

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Community Initiatives 172 East State St Columbus, OH 43215	94-3255070	501 (c) (3)	250,000				Community Collaboration
Corporation for Ohio Appalachian Development PO Box 787 Athens, OH 45764	31-0811788	501 (c) (3)	21,600				Program Operating Cost

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Council for a Strong America 1212 New York Ave NW Washington, DC 20005	13-3840271	501 (c) (3)	67,000				Community Collaboration
Council on Child Abuse of Southern Ohio Inc 4440 Lake Forest Dr Cincinnati, OH 45242	31-0942232	501 (c) (3)	8,042				Donor Design General

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

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Covington Independent School District 25 E 7th Street Covington, KY 41011	61-6001265	School District	15,400				Program Operating Cost
Covington Partners in Prevention PO Box 0426 Covington, KY 41012	20-1515753	501 (c) (3)	88,100				Program Operating Cost

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Crossroad Health Center 5 East Liberty St Cincinnati, OH 45202	31-1321054	501 (c) (3)	100,684				Program Operating Cost
CWFF Child Development Center 430 Forest Avenue Cincinnati, OH 45229	31-0901096	501 (c) (3)	55,200				Program Operating Cost

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DCCH Center for Children and Families 75 Orphanage Rd Ft Mitchell, KY 41017	61-0463943	501 (c) (3)	59,200				Program Operating Cost
DCCH Center for Children and Families 75 Orphanage Rd Ft Mitchell, KY 41017	61-0463943	501 (c) (3)	3,641				Donor Design General

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Highpoint Health 600 Wilson Creek Rd Lawrenceburg, IN 47025	35-6006595	501 (c) (3)	10,000				Program Operating Cost
Dearborn County Retired Senior Volunteer Program PO Box 4194 Lawrenceburg, IN 47025	35-1185161	501 (c) (3)	10,000				Program Operating Cost

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Easter Seals TriState 2901 Gilbert Ave Cincinnati, OH 45206	31-0873433	501 (c) (3)	224,484				Program Operating Cost
Education Matters 2104 Saint Michael St Cincinnati, OH 45204	23-7121512	501 (c) (3)	10,000				Program Operating Cost

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Envision Partnerships 2935 Hamilton Mason Rd Hamilton, OH 45011	31-6059934	501 (c) (3)	31,200				Program Operating Cost
Erlanger-Elsmere Independent School District 459 Buckner St Erlanger, KY 41018	61-6001276	School District	15,400				Program Operating Cost

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Every Child Succeeds 3333 Burnet Ave Cincinnati, OH 452293026	31-1628467	501 (c) (3)	1,771,400				Program Operating Cost
FamiliesFORWARD 2400 Reading Rd Cincinnati, OH 452021470	31-0536684	501 (c) (3)	348,084				Program Operating Cost

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Family Independence Initiative 1201 Martin Luther King Jr Way Oakland, CA 94612	02-0784790	501 (c) (3)	73,600				Program Operating Cost
Family Nurturing Center 8275 Ewing Blvd Florence, KY 41042	31-1011326	501 (c) (3)	107,400				Program Operating Cost

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Family Service of Middletown 1311 Columbia Ave Middletown, OH 45042	31-1023843	501 (c) (3)	76,000				Program Operating Cost
FreestoreFoodbank 1141 Central Parkway Cincinnati, OH 45202	23-7122205	501 (c) (3)	308,800				Program Operating Cost

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Girl Scouts of Kentucky's Wilderness Road Council 2277 Executive Dr Lexington, KY 40505	61-0608104	501 (c) (3)	19,200				Program Operating Cost
Girl Scouts of Western Ohio-Cincinnati 4930 Cornell Rd Cincinnati, OH 45242	31-0679091	501 (c) (3)	282,400				Program Operating Cost

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GRAD Cincinnati Inc 301 Oak St Cincinnati, OH 45219	31-1816376	501 (c) (3)	62,400				Program Operating Cost
Great Miami Valley YMCA 105 North Second St Hamilton, OH 45011	31-0536719	501 (c) (3)	25,600				Program Operating Cost

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Great Oaks Institute Health Professions Academy 1916 Central Parkway Cincinnati, OH 45214	31-0793117	School District	65,084				Program Operating Cost
Greater Cincinnati Behavioral Health Services 1501 Madison Rd Cincinnati, OH 45206	31-0802647	501 (c) (3)	794,684				Program Operating Cost

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Greater Cincinnati Foundation 200 W 4th St Cincinnati, OH 452022775	31-0669700	501 (c) (3)	50,000				Program Operating Cost
Greater Cincinnati Microenterprise Initiative 1740 Langdon Farm Rd Cincinnati, OH 45237	31-1595820	501 (c) (3)	35,200				Program Operating Cost

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GreenLight Fund 200 Clarendon Street Boston, MA 02116	20-0407083	501 (c) (3)	25,000				Program Operating Cost
Health Care Access Now 7162 Reading Rd Cincinnati, OH 45237	26-4042151	501 (c) (3)	48,000				Program Operating Cost

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HealthPoint Family Care Inc 1401 Madison Ave Covington, KY 41011	61-0729915	501 (c) (3)	48,000				Program Operating Cost
Healthy Homes Block by Block 2918 Price Ave Cincinnati, OH 45204	82-1424590	501 (c) (3)	36,800				Program Operating Cost

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Hearing Speech & Deaf Center of Greater Cincinnati 2825 Burnet Ave Cincinnati, OH 45219	31-0536654	501 (c) (3)	73,600				Program Operating Cost
Heart House Inc 6815 US 50 Aurora, IN 47001	35-2036398	501 (c) (3)	10,000				Program Operating Cost

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Holly Hill Child & Family Solutions 9599 Summer Hill Rd California, KY 41007	61-0461729	501 (c) (3)	36,800				Program Operating Cost
Hoosier Hills Literacy League PO Box 3556 Lawrenceburg, IN 47025	35-1802183	501 (c) (3)	10,000				Program Operating Cost

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Hoosier Trails Council Boy Scouts of America 5625 E St Rd 46 Bloomington, IN 47401	35-1290776	501 (c) (3)	5,195				Donor Design General
Hope House Rescue Mission Inc 34 South Main St Middletown, OH 45044	31-1254976	501 (c) (3)	27,200				Program Operating Cost

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Housing Opportunities Made Equal of Greater Cincinnati 2400 Reading Rd Cincinnati, OH 452021477	31-6062015	501 (c) (3)	59,200				Program Operating Cost
Hyde Park Center for Older Adults 2800 Erie Ave Cincinnati, OH 45208	31-0857401	501 (c) (3)	39,200				Program Operating Cost

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Interfaith Hospitality Network of Greater Cincinnati Inc 990 Nassau St Cincinnati, OH 45206	31-1335474	501 (c) (3)	38,400				Program Operating Cost
Jewish Family Service of the Cincinnati Area 8487 Ridge Rd Cincinnati, OH 45236	31-0744786	501 (c) (3)	255,400				Program Operating Cost

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Kennedy Heights Montessori Center 6120 Ridge Ave Cincinnati, OH 45213	31-0724420	501 (c) (3)	14,400				Program Operating Cost
Kenton County School District 1055 Eaton Drive Ft Wright, KY 41017	61-6001301	School District	19,250				Program Operating Cost

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Learn United 3200 E Camelback Rd Phoenix, AZ 85032	81-4030025	501 (c) (3)	10,000				Donor Design General
Legal Aid of the Bluegrass 300 E Main St Lexington, KY 40507	61-0668572	501 (c) (3)	167,200				Program Operating Cost

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Legal Aid Society of Greater Cincinnati 215 E Ninth St Cincinnati, OH 45202	31-0536673	501 (c) (3)	332,000				Program Operating Cost
Life Learning Center 20 West 18th St Covington, KY 41011	20-3454261	501 (c) (3)	191,684				Program Operating 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
LifeSpan Inc 1900 Fairgrove Ave Hamilton, OH 45011	31-0536660	501 (c) (3)	18,400				Program Operating Cost
LifeTime Resources Inc 13091 Benedict Dr Dillsboro, IN 47018	35-2076514	501 (c) (3)	18,400				Program Operating Cost

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

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Lighthouse Youth Services 401 East McMillian St Cincinnati, OH 45206	23-7046229	501 (c) (3)	191,200				Program Operating Cost
Madisonville Education and Assistance Center 4600 Erie Ave Cincinnati, OH 45227	31-1218223	501 (c) (3)	54,384				Program Operating Cost

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

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Mayerson JCC of Cincinnati 8485 Ridge Rd Cincinnati, OH 45236	31-0536986	501 (c) (3)	55,200				Program Operating Cost
Mental Health America of Northern Kentucky & Southwest Ohio 912 Scott St Covington, KY 41011	61-0712473	501 (c) (3)	70,400				Program Operating 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
Mercy Neighborhood Ministries 1602 Madison Rd Cincinnati, OH 45206	31-1376693	501 (c) (3)	53,684				Program Operating Cost
MORTAR 1329 Vine Street Cincinnati, OH 45202	47-2431620	501 (c) (3)	55,200				Program Operating Cost

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

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National Kidney Foundation 615 Elsinore Place Cincinnati, OH 45202	13-1673104	501 (c) (3)	5,000				Program Operating Cost
National Kidney Foundation 615 Elsinore Place Cincinnati, OH 45202	13-1673104	501 (c) (3)	12,830				Donor Design General

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

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New Hope Services 725 Wall St Jeffersonville, IN 47130	35-1022158	501 (c) (3)	10,000				Program Operating Cost
New Horizons Rehabilitation Inc 237 Six Pine Ranch Rd Batesville, IN 47006	35-1169221	501 (c) (3)	10,000				Program Operating Cost

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

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New Perceptions Inc 1 Sperti Dr Edgewood, KY 41017	61-0705047	501 (c) (3)	149,884				Program Operating Cost
Northern Kentucky Community Action Commission 717 Madison Ave Covington, KY 41011	61-0667805	501 (c) (3)	74,100				Program Operating Cost

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

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Northern Kentucky Education Council 7310 Turfway Rd Florence, KY 41042	20-3105862	501 (c) (3)	36,800				Program Operating Cost
NorthKey Community Care 1201 South Fort Thomas Ave Fort Thomas, KY 41075	61-0661458	501 (c) (3)	2,684				Program Operating Cost

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

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NorthKey Community Care 1201 South Fort Thomas Ave Fort Thomas, KY 41075	61-0661458	501 (c) (3)	2,337				Donor Design General
Norwood City School District 2132 Williams Avenue Norwood, OH 45212	31-6000908	School District	228,596				Community Collaboration

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

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Ohio Justice & Policy Center 215 East Ninth St Cincinnati, OH 45202	31-1319172	501 (c) (3)	55,000				Community Collaboration
One Community One Family Inc 920 County Line Road Batesville, IN 47006	46-4339778	501 (c) (3)	14,400				Program Operating Cost

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

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People Working Cooperatively Inc 4612 Paddock Rd Cincinnati, OH 45229	31-0859104	501 (c) (3)	87,200				Program Operating Cost
Per Scholas Inc 804 E 138th St Bronx, NY 10454	04-3252955	501 (c) (3)	46,400				Program Operating Cost

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

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Policy Matters Ohio 3631 Perkins Ave Cleveland, OH 44114	34-1921881	501 (c) (3)	40,000				Community Collaboration
Power Inspires Progress 727 Ezzard Charles Dr Cincinnati, OH 45203	31-1367071	501 (c) (3)	37,000				Program Operating Cost

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

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Prichard Committee for Academic Excellence 271 West Short St Lexington, KY 40507	61-1026214	501 (c) (3)	105,000				Community Collaboration
Pro Seniors Inc 7162 Reading Rd Cincinnati, OH 45237	31-0887471	501 (c) (3)	84,800				Program Operating Cost

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

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Project Nehemiah 434 Forest Avenue Cincinnati, OH 45229	20-4383536	501 (c) (3)	45,000				Program Operating Cost
ProKids 2605 Burnet Ave Cincinnati, OH 45219	31-1020021	501 (c) (3)	80,800				Program Operating Cost

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Public Childrens Services Association of Ohio 37 West BRd St Columbus, OH 43215	31-0996612	501 (c) (3)	20,000				Community Collaboration
Redwood Rehabilitation Center 71 Orphanage Rd Ft Mitchell, KY 41017	61-6013702	501 (c) (3)	361,800				Program Operating Cost

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

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ReSource 3610 Park 42 Drive Cincinnati, OH 45241	31-1364553	501 (c) (3)	10,000				Program Operating Cost
Rosemary's Babies Co 3284 North Bend Road Cincinnati, OH 45238	81-3727709	501 (c) (3)	22,400				Program Operating 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
Safe Passage Inc PO Box 235 Batesville, IN 47006	35-2056072	501 (c) (3)	10,400				Program Operating Cost
Santa Maria Community Services Inc 617 Steiner Ave Cincinnati, OH 45204	31-0537141	501 (c) (3)	778,484				Program Operating Cost

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

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Seven Hills Neighborhood Houses 901 Findlay Street Cincinnati, OH 45217	31-0648619	501 (c) (3)	55,200				Program Operating Cost
Shared Harvest Foodbank 5901 Dixie Highway Fairfield, OH 45014	31-1096571	501 (c) (3)	18,400				Program Operating Cost

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Shared Harvest Foodbank 5901 Dixie Highway Fairfield, OH 45014	31-1096571	501 (c) (3)	12,792				Donor Design General
Sojourner Recovery Services 314 North Erie Hwy Hamilton, OH 45011	31-1010079	501 (c) (3)	20,800				Program Operating Cost

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Sojourner Recovery Services 314 North Erie Hwy Hamilton, OH 45011	31-1070029	501 (c) (3)	1,069				Donor Design General
South Dearborn School Corporation 6109 Squire Place Aurora, IN 47001	35-1150150	School District	6,000				Program Operating Cost

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Southeastern Indiana Economic Opportunity Corporation PO Box 240 Aurora, IN 47001	35-1118476	501 (c) (3)	14,400				Program Operating Cost
Southern Hills Career & Technical Center 9193 Hamer Rd Georgetown, OH 451219472	31-0793753	501 (c) (3)	10,000				Program Operating Cost

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Southgate Independent School District 6 William F Blatt Avenue Southgate, KY 41071	61-6001363	School District	10,000				Program Operating Cost
St Joseph Orphanage 5400 Edalbert Dr Cincinnati, OH 45239	31-0537147	501 (c) (3)	73,600				Program Operating Cost

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

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St Joseph Orphanage 5400 Edalbert Dr Cincinnati, OH 45239	31-0537147	501 (c) (3)	18,115				Donor Design General
St Rita School for the Deaf 1720 Glendale Milford Rd Cincinnati, OH 45215	31-0537509	501 (c) (3)	43,318				Donor Design General

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

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Starfire Council of Greater Cincinnati Inc 5030 Oaklawn Dr Cincinnati, OH 45227	31-1372833	501 (c) (3)	55,200				Program Operating Cost
Stepping Stones 5650 Given Rd Cincinnati, OH 45243	31-0671799	501 (c) (3)	136,284				Program Operating Cost

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

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Strategies to End Homelessness 2368 Victory Parkway Cincinnati, OH 45206	20-8286347	501 (c) (3)	220,800				Program Operating Cost
Sunman Dearborn Community School District 1 Trojan Place Street Leon, IN 47012	35-1147091	School District	6,000				Program Operating Cost

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

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Supports to Encourage Low-Income Families PO Box 1322 Hamilton, OH 45012	31-1445223	501 (c) (3)	30,400				Program Operating Cost
Talbert House 2600 Victory Parkway Cincinnati, OH 45206	31-0713350	501 (c) (3)	270,684				Program Operating Cost

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Teen Challenge Cincinnati PO Box 249 Milford, OH 45150	23-7303165	501 (c) (3)	18,400				Program Operating Cost
Teen Challenge Cincinnati PO Box 249 Milford, OH 45150	23-7303165	501 (c) (3)	23,670				Donor Design General

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Tender Mercies Inc PO Box 14465 Cincinnati, OH 452500465	31-1137270	501 (c) (3)	77,600				Program Operating Cost
The Children's Home of Cincinnati Ohio 5050 Madison Rd Cincinnati, OH 452271440	31-0536969	501 (c) (3)	828,000				Program Operating Cost

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The DAD Initiative Inc 260 Northland Blvd Springdale, OH 45246	90-1131034	501 (c) (3)	36,800				Program Operating Cost
The Literacy Council of Clermont & Brown Counties 745 Center St Milford, OH 45150	31-1111791	501 (c) (3)	11,200				Program Operating Cost

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The Salvation Army Indiana Division 6060 Castleway Army Indianapolis, IN 462091041	36-2167910	501 (c) (3)	10,000				Program Operating Cost
The Salvation Army of Greater Cincinnati PO Box 238 Cincinnati, OH 452010238	13-5562351	501 (c) (3)	242,400				Program Operating Cost

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The Salvation Army of Middletown PO Box 445 Middletown, OH 45042	13-5562351	501 (c) (3)	49,600				Program Operating Cost
Tristate Veterans Community Alliance 3805 Edwards Rd Cincinnati, OH 45209	47-2444997	501 (c) (3)	36,800				Program Operating Cost

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University of Cincinnati Foundation PO Box 1038 Cincinnati, OH 452739972	26-1594868	501 (c) (3)	27,200				Program Operating Cost
Urban League of Greater Southwest Ohio 3458 Reading Rd Cincinnati, OH 45229	31-0565428	501 (c) (3)	522,400				Program Operating Cost

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Urban League of Greater Southwest Ohio 3458 Reading Rd Cincinnati, OH 45229	31-0565428	501 (c) (3)	12,216				Donor Design General
Urban Minority Alcoholism & Drug Abuse Outreach 3021 Vernon Place Cincinnati, OH 45219	31-1182430	501 (c) (3)	55,200				Program Operating Cost

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

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Voices for Ohio's Children 33 N Third St Columbus, OH 43215	34-1941907	501 (c) (3)	22,000				Community Collaboration
Volunteers of America Mid-States Inc 933 Goss Ave Louisville, KY 40217	61-0480950	501 (c) (3)	69,600				Program Operating Cost

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Wave Pool 2940 Colerain Avenue Cincinnati, OH 45225	45-5054823	501 (c) (3)	7,500				Program Operating Cost
Welcome House of Northern Kentucky Inc 205 Pike St Covington, KY 41011	61-1020382	501 (c) (3)	129,284				Program Operating Cost

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

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Wesley Community Services 2091 Radcliff Dr Cincinnati, OH 45204	31-0537097	501 (c) (3)	36,800				Program Operating Cost
Women Helping Women 215 E Ninth St Cincinnati, OH 452026109	31-0864991	501 (c) (3)	80,800				Program Operating Cost

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Women's Crisis Center 3580 Hargrave Dr Hebron, KY 41048	61-0908752	501 (c) (3)	184,000				Program Operating Cost
Working in Neighborhoods (WIN) 1814 Dreman Ave Cincinnati, OH 45223	31-0962007	501 (c) (3)	55,200				Program Operating Cost

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

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Xavier University 3800 Victory Parkway Cincinnati, OH 452077770	31-0537516	501 (c) (3)	8,000				Program Operating Cost
YMCA of Greater Cincinnati 1105 Elm St Cincinnati, OH 45202	31-0537178	501 (c) (3)	444,284				Program Operating Cost

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Youth Encouragement Services Inc 11636 County Farm Rd Aurora, IN 47001	31-0991515	501 (c) (3)	10,000				Program Operating Cost
YWCA of Greater Cincinnati 898 Walnut St Cincinnati, OH 45202	31-0537518	501 (c) (3)	630,600				Program Operating Cost

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YWCA of Hamilton Ohio 244 Dayton St Hamilton, OH 45011	31-0537167	501 (c) (3)	14,400				Program Operating Cost

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
United Way of Greater Cincinnati

Employer identification number
31-0537502

Part I Questions Regarding Compensation

		Yes	No		
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>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</p>	1b				
<p>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?</p>	2				
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	Yes			
	4b		No		
	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a		No		
	5b		No		
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a		No		
	6b		No		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7		No		
<p>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.</p>	8		No		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	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
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Ross Meyer Interim President/CEO, See Sch J Part III	(i)	151,890	0	105	5,261	21,824	179,080	0
	(ii)	0	0	0	0	0	0	0
2 Michael Johnson President/CEO, See Sch J Part III	(i)	124,270	75,000	206,181	0	11,490	416,941	0
	(ii)	0	0	0	0	0	0	0
3 Robert Reifsnnyder President/CEO, See Sch J Part III	(i)	188,896	0	5,585	6,220	10,250	210,951	0
	(ii)	0	0	0	0	0	0	0
4 Jill Johnson SVP, Finance & Operations	(i)	163,293	0	521	6,608	8,800	179,222	0
	(ii)	0	0	0	0	0	0	0
5 Christina McVeigh SVP/Chief Strategy Officer	(i)	171,556	0	48	7,200	22,226	201,030	0
	(ii)	0	0	0	0	0	0	0
6 Margaret Hulbert SVP, Strategic Res & Pub Policy	(i)	132,417	0	1,463	5,804	24,378	164,062	0
	(ii)	0	0	0	0	0	0	0
7 Chris Martin SVP, Development	(i)	134,812	0	248	5,039	16,895	156,994	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>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 2017 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 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.</p> <p>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 2016 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 Executive Committee in an executive session from which staff is excused. The Executive Committee meeting occurs annually, typically in March.</p>

Return Reference	Explanation
Schedule J, Part II	During the tax year ended December 31, 2018 three individuals served in the role of President/CEO Robert Reifsnyder served as President/CEO since 2001 until his retirement on May 31, 2018 He received \$210,951 in compensation, accrued vacation payout and benefits, as reported on Schedule J, Part II, in 2018 Michael Johnson served as President/CEO from July 1, 2018 through November 15, 2018 In connection with his beginning employment, Michael Johnson received a \$75,000 signing bonus and taxable relocation expenses of \$35,000 Pursuant to an agreement between Michael Johnson and UWGC, Michael Johnson received severance payments in the amount of \$171,154 He thus received \$416,941 in total compensation and benefits, as reported on Schedule J, Part II, in 2018 Ross Meyer began serving as Interim President/CEO starting on October 29, 2018 Prior to serving as President/CEO, he served as SVP of Community Impact from January 1, 2018 through October 28, 2018 He received \$45,263 in compensation and benefits for his service as President/CEO and \$133,817 in compensation and benefits for his service as SVP of Community Impact His total compensation, as reported on Schedule J, Part II, was \$179,080 in 2018

Return Reference	Explanation
Schedule J, Part I, Line 4a Severance or change-of-control payment	Michael Johnson received \$171,154 of severance payments during the year ended December 31, 2018



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

2018

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 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 4 main 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 9 main 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)

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

Table with 5 main 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) University of Cincinnati	Board Member	302,200	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	Neville Pinto, Ph D, who is a Board Member of UWGC, is the President of the University of Cincinnati

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

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 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	248	1,986,514	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 ▶ (<u>National Advertising</u>)	X	1	375,000	Market value
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**

	Yes	No
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?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
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 II Supplemental Information.

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

Return Reference	Explanation
Schedule M, Part I, 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 Other - National Advertising Number of Contributions

SCHEDULE O
(Form 990 or 990-EZ)**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.

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

**Open to Public
Inspection**

Department of the Treasury

Name of the organization

United Way of Greater Cincinnati

Employer identification number

31-0537502

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 6 Total Number of Volunteers	UWGC volunteers include board members, committee members, campaign ambassadors, employee campaign coordinators, direct service and event volunteers

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4a PROGRAM SERVICE DESCRIPTION</p>	<p>Community Solutions Quality Education Experiences Preparing Greater Cincinnati Children for School and Supporting Their Academic Success Through Adulthood In some parts of our region nearly 40% of children entering kindergarten do not have the basic skills they need to be ready for kindergarten This can directly impact their ability to catch up and be reading at grade level at third grade - this is critical as some national studies show that children not reading at grade level in third grade are up to 74% more likely to drop out of high school These children will be much more likely to find themselves struggling to make ends meet as adults Adults who graduate high school are less likely to be unemployed, live in poverty and will earn more in their lifetime than those with less than a high school degree United Way of Greater Cincinnati helps our region's families by supporting solutions that create quality educational experiences with long term impact for all individuals From quality early education for our youngest generation to post-secondary job training for adults, United Way is creating quality education experiences In 2018, with the support of partners like you, United Way of Greater Cincinnati * Helped 713 children in quality childcare programs demonstrate progress in early language and pre-reading skills * Supported 1,128 children in United Way supported program achieve promotion to the next grade level * Helped 1,704 children in quality childcare programs demonstrate progress in social and emotional skills Your gift helps families access quality educational experiences across their lifetimes to ensure academic success and increase job skills for the future Please give to help families break the cycle of poverty through strong education Financial Stability Helping Greater Cincinnati Families Manage Today's Finances and Build for the Future More than 60% of children growing up in poverty in the Greater Cincinnati region have at least one working parent For working families living in poverty, income can be volatile as work hours and jobs may be sporadic At the same time, families in poverty often have limited access to financial products Programs that help build work skills, increase wages, and support families' abilities to close the gap between income and basic expenses ensure success for today While access to financial products and services help families build their finances for the future United Way of Greater Cincinnati helps our region's families by supporting key solutions that help families access well-paying jobs, critical work supports (such as childcare and health insurance) and financial services to successfully manage financial needs and build economic security In 2018, with the support of partners like you, United Way of Greater Cincinnati * Helped 2,528 individuals obtain employment * Assisted 276 individuals as they increased their earnings * Increased the knowledge of 2,584 individuals around financial co</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4a PROGRAM SERVICE DESCRIPTION</p>	<p>cepts like budgeting, savings and credit and debt * Helped 182 families to increase their income above 200% of the Federal Poverty Level - a common measure of whether a family makes enough to be financially stable Your gift connects families who are working yet still in poverty to the supports and services to help build their finances towards long-term stability Please give to support families as they break the cycle of poverty and increase their financial stability Basic Needs Supporting Greater Cincinnati Families in Times of Financial Crisis Across Greater Cincinnati, more than 175,000 children are growing up in poverty Too many families struggle to make ends meet and obtain basic essentials like safe and affordable housing, healthy food, and transportation When families struggle with the basics, it is difficult for them to focus on their goals for the future Without the strong foundation provided by basic needs families will struggle - their kids will struggle in school and parents will struggle in their jobs United Way of Greater Cincinnati helps our region's families by supporting key solutions that help families facing short term financial setbacks connect with the resources necessary to weather the storm and provide the basics for their families These efforts focus on stabilizing families to help build the foundation to allow them to then pursue long term school, work and health goals In 2018, with the support of partners like you, United Way of Greater Cincinnati * Helped 1,177 families and individuals obtain affordable housing * Screened 38,186 households to determine if they were eligible for public benefits that can help temporarily ease financial burdens * Provided 337,805 resources to families in need including emergency financial assistance, household goods, and a 3 day supply of food Your gift helps provide temporary assistance to families in need so they can better meet their long term goals Please give to support families in times of financial crisis and help them break the cycle of poverty Physical and Mental Health Ensuring the Greater Cincinnati Community is Healthy and Strong In a recent study, only 48% of adults in Greater Cincinnati reported that they felt they were in excellent or very good health When a family member has a health issue it can cause stress and financial strain that makes it difficult for families to focus on their long-term goals At the same time, we know that financial strain can often lead to stress that affects mental and physical health Having good health leads to better grades for kids and better employment options for adults United Way of Greater Cincinnati helps our region's families by supporting solutions that provide access to physical and mental health services This helps individuals throughout their lives to help families in our region thrive In 2018, with the support of partners like you, United Way of Greater Cincinnati * Ensured 10,317 had a usual and appropriate plan</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4a PROGRAM SERVICE DESCRIPTION	ce to go for healthcare * Helped 8,542 individuals improve healthy behaviors * Ensured 17, 633 people reduced their risk for abuse, neglect and/or exploitation * Helped 3,633 individuals increase their ability to manage a chronic health condition Your gift helps families receive access to health services so they can be in excellent health Please give to help families break the cycle of poverty as they thrive and live healthy lives

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4b Program Service Description	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 Organizations receiving donor designated contributions through UWGC undergo screening prior to distribution of funding Screening includes verification of compliance with the provisions of the Patriot Act and verification of current status as an IRS code section 501(c)(3) nonprofit organization Designations received in the fall campaign are distributed the following year based upon amounts collected

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c Direct Services	Direct Services are services provided by UWGC, such as United Way 211 and United Way 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 and Middletown in Ohio, Boone, Kenton, Campbell, and Grant counties in Kentucky, and Dearborn, Jefferson, Ohio, Ripley, and Switzerland counties in Indiana. United Way Volunteer Connection strives to increase the effectiveness and participation of all segments of volunteer resources through recruitment, training, education, and recognition.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 385,567 including grants of \$ 0)(Revenue \$ 726,110) CENTRAL SERVICES Central Services include self-supporting programs which serve UWGC's operating divisions and other non-profit organizations These fee-producing programs include group employee benefits administration, building and grounds management and accounting

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	David Phillips and Scott Phillips - Family relationship

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 4 Significant changes to organizational documents	The UWGC Code of Regulations were updated and approved by the Board of Directors in April 2018. Changes consisted of abbreviation of terms, updating of language that was outdated, minimum meeting notice days shortened, and the Executive Committee expanded to include Chief Strategy Officer and/or Chief Financial Officer as non-voting members.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	GOVERNING BODY AND MANAGEMENT The 2018 Form 990 was prepared by the finance staff and then reviewed by the Controller, the accountability and service cabinet, and BKD, LLP, UWGC's audit firm A hidden link to UWGC's website provided access to a 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 Controller

990 Schedule O, Supplemental Information

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. Members of the Board, Cabinets and some committees and UWGC staff are requested to annually file with the Chief Strategy Officer (CSO) 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.

990 Schedule O, Supplemental Information

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 2017 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 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 2017 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</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	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 Executive Committee in an executive session from which staff is excused. The Executive Committee meeting occurs annually, typically in March.

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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 FOUNDATION WAS 1 HOUR MICHAEL JOHNSON'S AVERAGE HOURS WORKED PER WEEK FOR UWGC FOUNDATION WAS 1 HOUR ROSS MEYER'S AVERAGE HOURS WORKED PER WEEK FOR UWGC FOUNDATION WAS 1 HOUR JILL JOHNSON'S AVERAGE HOURS WORKED PER WEEK FOR UWGC FOUNDATION WAS 1 HOUR

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VII, Section A OFFICERS, DIRECTORS, TRUSTEES, OR KEY EMPLOYEES	UWGC board members whose term expired in April 2018 or who left the board for various reasons during 2018 are as follows 1 Rob Reifsnyder 2 Michael Johnson 3 Julia Poston 4 Shakila Ahmad 5 Patricia Baker 6 Karen Bankston 7 Steve Cruse 8 Christoper Froman 9 Monica Garnes 10 Kay Geiger 11 Julie Highley 12 Molly North 13 Lisa O'Brien 14 Mary Stagaman 15 Theodore Torbeck

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VII, Section A	Karen Bankston served as a board member until April 2018 and was not compensated for this role. In 2018, she was employed as the Executive Director, Child Poverty Collaborative until August 3, 2018. Karen Bankston was compensated \$101,055 as the Executive Director.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	All other program svc revneue - Total Revenue 156539, Related or Exempt Function Revenue 156539, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 ,

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Market Value Change in Beneficial Interest - -121921,

990 Schedule O, Supplemental Information

Return Reference	Explanation
CEO/CFO Financial Statement Certification	Ross Meyer, Interim President/CEO and Dawn Reynolds, Controller/ Interim CFO, certify that they have reviewed the audited financial statements and financial information reported on the IRS Form 990 of United Way of Greater Cincinnati (UWGC) Based on their knowledge, the financial information contained in these documents 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, 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, 2018

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

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

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)	Type I	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
(1) CHARITABLE REMAINDER 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

	Yes	No
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		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)	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
(1) United Way of Greater Cincinnati Foundation	C	3,631,800	Book Value
(2) United Way of Greater Cincinnati Foundation	L	215,593	Book Value
(3) United Way of Greater Cincinnati Foundation	O	186,861	Book Value

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation