

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

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

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

C Name of organization
 HISPANIC UNITY OF FLORIDA INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
 5840 JOHNSON STREET

City or town, state or province, country, and ZIP or foreign postal code
 HOLLYWOOD, FL 33021

F Name and address of principal officer
 JOSIE BACALLAO
 5480 JOHNSON STREET
 HOLLYWOOD, FL 33021

D Employer identification number
 59-2230272

E Telephone number
 (954) 964-8884

G Gross receipts \$ 5,095,858

- I** Tax-exempt status: 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 527
- J** Website: ▶ WWW.HISPANICUNITY.ORG
- K** Form of organization: Corporation Trust Association Other ▶

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 ▶

L Year of formation 1982 **M** State of legal domicile FL

Part I Summary

1	Briefly describe the organization's mission or most significant activities EMPOWERING IMMIGRANTS AND OTHERS TO BECOME SELF-SUFFICIENT, PRODUCTIVE AND CIVICALLY ENGAGED		
2	Check this box <input type="checkbox"/> 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)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	17
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	241
6	Total number of volunteers (estimate if necessary)	6	250
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,447,311	4,587,004
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	168,978	181,333
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	48	197
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	88,145	307,433
		3,704,482	5,075,967
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	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)	2,977,981	3,448,531
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,102		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,148,878	1,333,171
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,126,859	4,781,702	
19 Revenue less expenses Subtract line 18 from line 12	-422,377	294,265	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,916,555	3,604,497
	22 Net assets or fund balances Subtract line 21 from line 20	667,168	1,060,845
		2,249,387	2,543,652

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: 2017-06-10

JOSIE BACALLAO PRESIDENT/ CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name NESTOR CABALLERO CPA MST	Preparer's signature NESTOR CABALLERO CPA MST	Date 2017-06-16	Check <input type="checkbox"/> if self-employed	PTIN P00392081
Firm's name ▶ ALBERNI CABALLERO & FIERMAN LLP			Firm's EIN ▶ 55-0912340	
Firm's address ▶ 4649 PONCE DE LEON BLVD SUITE 404 CORAL GABLES, FL 33146			Phone no (305) 662-7272	

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

OUR COUNTRY IS A BEACON OF FREEDOM AND OPPORTUNITY AND HISPANIC UNITY OF FLORIDA, INC (HUF) IS LIKE THE SOUTHERN OUTPOST OF ELLIS ISLAND, WELCOMING NEWCOMERS TO OUR COUNTRY AND GUIDING THEM ON THEIR OFTEN DIFFICULT, BUT ALWAYS HOPEFUL, LIFE-LONG PROCESS OF LEARNING WHAT IT MEANS TO BE AN AMERICAN THIS IS AT THE HEART OF OUR WORK HUF WAS ORIGINALLY FOUNDED IN 1982 BY COMMUNITY LEADERS TO GUIDE THESE ASPIRING AMERICANS ON THEIR JOURNEY TO THEIR AMERICAN DREAM AND TO EASE THEIR ACCULTURATION PROCESS TODAY, HUF IS BROWARD COUNTY'S LARGEST 501(C) (3) AGENCY DEDICATED TO THE IMMIGRANT POPULATION FOR 35 YEARS, THIS AGENCY HAS LEFT AN INDELIBLE MARK ON THE MORE THAN 400,000 INDIVIDUALS AND FAMILIES SERVED, AND CONTINUES TO DELIVER ON ITS MISSION OF EMPOWERING IMMIGRANTS AND OTHERS TO BECOME SELF-SUFFICIENT, PRODUCTIVE AND CIVICALLY ENGAGED WITH 12 PROGRAMS AND MORE THAN 30 SERVICES OFFERED IN 4 LANGUAGES, HUF IS ABLE TO SERVE SOUTH FLORIDA'S DIVERSE COMMUNITY TWO-THIRDS OF HUF'S CLIENT

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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 \$ 2,478,138 including grants of \$) (Revenue \$ 130,401) LANGUAGE & EDUCATION ENGLISH FOR SPEAKERS OF OTHER LANGUAGES (ESOL) - THE SCHOOL BOARD OF BROWARD COUNTY (SBBC) PROVIDED ENGLISH CLASSES TO OVER 1,001 STUDENTS AT HUF CLASSES WERE CONDUCTED IN THE MORNING AND EVENING THE OBJECTIVE IS TO PROVIDE ENGLISH CLASSES MAINLY TO CLIENTS SEEKING EMPLOYMENT AND PURSUING A HIGHER EDUCATION GENERAL EDUCATION DIPLOMA (GED) - THE SCHOOL BOARD OF BROWARD COUNTY ALSO PROVIDED GED CLASSES TO 39 STUDENTS AT HUF CLASSES WERE CONDUCTED IN THE EVENINGS UNITY 4KIDS PRESCHOOL - IN 2016, UNITY 4KIDS (U4K) EARLY LEARNING CENTER SERVED 36 CHILDREN AND 62 PARENTS BY THE END OF THE YEAR, 97% (35 OUT OF 36) OF THE CHILDREN DEMONSTRATED GAINS IN LANGUAGE, SOCIAL-EMOTIONAL, AND PHYSICAL, COGNITIVE, LITERACY, MATHEMATICS, SCIENCE & TECHNOLOGY, SOCIAL STUDIES, ART AND ENGLISH LANGUAGE ACQUISITION AS DEMONSTRATED BY THE TEACHER STRATEGIES GOLD (TSG) ASSESSMENT THE STUDENT WHO DID NOT DEMONSTRATE GAINS (1 OUT OF 36, 3%) PRESENTED DEVELOPMENTAL CHALLENGES AND WAS APPROPRIATELY REFERRED ADDITIONALLY, VOLUNTARY PREKINDERGARTEN (VPK) STUDENTS RECEIVED THEIR VPK PRE- AND POST- ASSESSMENTS AND 91% (10 OUT OF 11) OF THE CHILDREN DEMONSTRATED MEETING OR EXCEEDING EXPECTATIONS IN THE PHONOLOGICAL AWARENESS, PRINT KNOWLEDGE, ORAL LANGUAGE/VOCABULARY AND MATH AREAS THE STUDENT WHO DID NOT DEMONSTRATE GAINS (1 OUT OF 11, 9%) PRESENTED DEVELOPMENTAL CHALLENGES AND WAS APPROPRIATELY REFERRED TO THE CHILDREN DIAGNOSTIC CENTER FOR EVALUATION IN JANUARY 2016, UNITY 4KIDS BECAME A GOLD SEAL ACCREDITED SCHOOL THROUGH THE NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION (NECPA) NECPA WAS ESTABLISHED IN 1991 TO ENCOURAGE QUALITY AND RECOGNIZE EXCELLENCE IN EARLY CHILDHOOD PROGRAMS THROUGHOUT THE UNITED STATES AND OTHER COUNTRIES THE U4K CENTER ALSO RECEIVED THE RESULTS OF THE STUDENTS READINESS RATE FROM THE DEPARTMENT OF EDUCATION INDICATING THAT 100% OF UNITY 4KIDS VPK- STUDENTS FOR THE 2014-2015 SCHOOL YEAR WERE READY FOR KINDERGARTEN UNITY 4TEENS MIDDLE SCHOOLS - FROM JANUARY THROUGH DECEMBER 2016 THE UNITY 4TEENS (U4T) SERVED A TOTAL OF 357 UNDUPLICATED STUDENTS FROM APOLLO, ATTUCKS, MCNICOL AND OLSEN MIDDLE SCHOOLS THE PROGRAM PROVIDED ACADEMIC AND ENRICHMENT ACTIVITIES AS WELL AS CASE MANAGEMENT SERVICES FOR THE ENTIRE FAMILY IN 2016, THE U4T PROGRAM CONTINUED TO OFFER THE FREE "PADRES COMPROMETIDOS" (ENGAGED PARENTS) WORKSHOPS TO INCREASE PARENT ENGAGEMENT IN THEIR CHILDREN'S EDUCATION, AS WELL AS ENCOURAGE THEM TO BECOME FAMILIAR WITH THE SCHOOL SYSTEM IN GENERAL DURING 2016, U4T RECEIVED NEW FUNDING FROM THE AETNA FOUNDATION, TARGET AND THE CITY OF HOLLYWOOD TO ENHANCE THE NUTRITION AND FITNESS COMPONENT "A SIZE HEALTHY" ASH PROGRAM STUDENTS NOW SEE THE RELATIONSHIP BETWEEN WHAT THEY PLANT IN THE GARDEN, THE DAILY PHYSICAL ACTIVITY, THE COOKING AND THE NUTRITION WORKSHOPS AS A RESULT OF ALL THESE COMPONENTS WORKING TOGETHER, THE FOLLOWING SUCCESSFUL OUTCOMES WERE OBTAINED DURING 2016 -100% OF PARTICIPANTS DID NOT OBTAIN A NEW LAW VIOLATION -100% OF PARTICIPANTS DID NOT BECOME OR CAUSE PREGNANCY -100% OF PARTICIPANTS DID NOT USE ALCOHOL AND/OR DRUGS -75% OF PARTICIPANTS IMPROVED SCHOOL GRADES AND/OR ATTENDANCE (JANUARY THROUGH JUNE) IN 2016, THE PROGRAM RENEWED ITS CONTRACT WITH THE CHILDREN'S SERVICES COUNCIL OF BROWARD COUNTY (CSC) AND INCREASED FUNDING BY 17% TO SERVE AN ADDITIONAL 37 STUDENTS (257 VS 220) UNITY 4TEENS HIGH SCHOOLS - IN 2016, THE UNITY 4TEENS (U4T) HIGH SCHOOL PROGRAM SERVED MORE THAN 500 HIGH SCHOOL STUDENTS (INCLUDED ONLY STUDENTS WITH A MINIMUM ATTENDANCE OF 30 DAYS DURING THE ENTIRE SCHOOL YEAR) U4T HIGH SCHOOL STUDENTS ALSO LEARNED TO DEVELOP SMART (SPECIFIC, MEASURABLE, ATTAINABLE, RELEVANT & TIME-BOUND) GOALS STUDENTS LEARNED FINANCIAL LITERACY SKILLS THAT WILL HELP THEM IN COLLEGE, CAREER, AND BEYOND JUNIORS AND SENIORS WHO ENROLLED IN THE COLLEGE AND CAREER READINESS (CCR) COMPONENT RECEIVED INTENSE TRAINING AND SUPPORT TO PREPARE THEM FOR THE AMERICAN COLLEGE TESTING (ACT) EXAM ACTIVITIES DURING THIS PAST YEAR INCLUDED HEALTH AND WELLNESS, GRAPHICS AND WEB DESIGN, CULTURAL ARTS, COMPUTER GAME DESIGN, HISTORY OF THE AMERICAS, HOMEWORK ASSISTANCE, TUTORING, COMMUNITY SERVICE LEARNING, PREVENTIVE EDUCATION, ACT/SAT PREPARATION, AND COLLEGE AND CAREER READINESS MIRAMAR HIGH SCHOOL'S TEEN OUTREACH PROGRAM (TOP) CLUB CONTRIBUTED 46 COMMUNITY SERVICE HOURS TO BENEFIT THE SCHOOL AND THE COMMUNITY, EXCEEDING THE PROGRAM'S REQUIRED 20 HOURS THIS INCLUDED A SUBSTANTIAL CLOTHING DRIVE FOR HAITI THE U4T HIGH SCHOOL PROGRAM WAS SUCCESSFUL IN ACHIEVING HIGH STUDENT IMPROVEMENT AND MEETING CONTRACT REQUIREMENTS FOR THE 2015/16 PROGRAM YEAR -91% OF PARTICIPANTS DECREASED THEIR NUMBER OF UNEXCUSED ABSENCES -100% OF PARTICIPANTS DECREASED EXTERNAL SUSPENSIONS -79% OF PARTICIPANTS IMPROVED READING -75% OF PARTICIPANTS IMPROVED MATH -72% OF PARTICIPANTS IMPROVED SCIENCE HOLLYWOOD HILLS HIGH - 95 YOUTHS PARTICIPATED IN THE GUIDE2GOALS (G2G) PROGRAM AT HOLLYWOOD HILLS HIGH SCHOOL, WHICH SUCCESSFULLY ENDED IN DECEMBER 2016 THE INITIATIVE WAS DIVIDED INTO FOUR COHORTS, THE LAST COHORT INCLUDED PREVIOUS PARTICIPANTS WHO SERVED AS MENTORS TO NEW MEMBERS THROUGHOUT THE WORK OF THE FOUR COHORTS AND THE DEDICATION OF THE STAFF, STUDENTS WERE ABLE TO FINALIZE THE AMBITIOUS COMMUNITY SERVICE ACTIVITY THAT WAS INITIALLY PROPOSED AS A SMART PHONE APPLICATION AND, AT THE END, BECAME A COMPREHENSIVE WEBSITE STUDENTS ALSO ENJOYED INFORMATIVE AND GUIDED TRIPS TO DIFFERENT COLLEGES AND UNIVERSITIES IN THE STATE (I E NOVA SOUTHEASTERN UNIVERSITY, BROWARD COLLEGE, FIU, FAU, FSU, UF, AND UCF AMONG OTHERS) FAMILY STRENGTHENING - IN 2016, HUF COMPLETED SIX SESSION CYCLES AT TWO LOCATIONS - BROWARD COUNTY PUBLIC SCHOOLS AND AT HUF THE FAMILY STRENGTHENING PROGRAM (FSP) SERVED A TOTAL OF 87 FAMILIES, WHICH INCLUDED 87 CHILDREN AND 130 PARENTS THE MAJORITY OF FAMILIES 85% (74 OUT OF 87) FULLY AND SUCCESSFULLY COMPLETED THE FOUR COMPONENTS OF THE FSP FAMILIES HAD THE OPPORTUNITY TO ENJOY ROLE PLAY, DISCUSSION, AND EXPRESSIVE ART ACTIVITIES TO BUILD POSITIVE AND NURTURING RELATIONSHIPS ADDITIONALLY, PARENTS COMPLETED THE PRE- & POST ADULT-ADOLESCENT PARENTING INVENTORY (AAPI-2) ASSESSMENT AND 100% OF THE FAMILIES THAT PARTICIPATED AND COMPLETED THE PROGRAM DEMONSTRATED IMPROVEMENT IN THEIR APPROPRIATE EXPECTATIONS, EMPATHY, DISCIPLINE, FAMILY ROLES AND INDEPENDENCE 15% (13 OUT OF 87) OF FAMILIES PARTICIPATED IN ONLY THREE SESSIONS AND DID NOT WANT TO CONTINUE FOR VARIOUS REASONS

4b (Code) (Expenses \$ 1,736,627 including grants of \$) (Revenue \$) ECONOMIC MOBILITY & ENTREPRENEURSHIP CENTER FOR WORKING FAMILIES (CWF) - DURING THE YEAR 2016, THE CWF PROGRAM ASSISTED A TOTAL OF 500 LOW-INCOME INDIVIDUALS/FAMILIES PROVIDING MULTIPLE BUNDLED SERVICES, IT IS IMPORTANT TO NOTE THE ACCOMPLISHMENTS OF EACH COMPONENT THAT MAKE UP THIS PROGRAM INCOME SUPPORTS -SNAP - 2,170 APPLICATIONS SUBMITTED IMPACTING 4,200 INDIVIDUALS (GOAL 2,000) -ACA - 255 CLIENTS PURCHASED A QUALIFIED HEALTH PLAN (1.5M IN PREMIUM SAVINGS PER YEAR) -COMPRANDO RICO Y SANO - 800 PARTICIPANTS ATTENDED THE "CHARLAS" (GOAL 600 - 1,200) AND 15 GROCERY TOURS WERE CONDUCTED (GOAL 15 TOURS) WORKFORCE DEVELOPMENT -70% OF PARTICIPANTS ACQUIRED EMPLOYMENT OR A BETTER JOB (GOAL 60%) -30% RETAINED THEIR EMPLOYMENT FOR A MINIMUM OF THREE MONTHS (GOAL 35%) FINANCIAL CAPABILITY AND WEALTH BUILDING -100% OF THE PARTICIPANTS WHO ATTENDED THE 5-DAY CWF WORKSHOPS LEARNED ABOUT BUDGETING, SAVING, AND HOW TO MAKE THE RIGHT CHOICE WHEN CHOOSING A BANKING PRODUCT OR ACCEPTING A CREDIT CARD OFFER -70% OF EMPLOYED PARTICIPANTS REDUCED DEBT AND/OR IMPROVED CREDIT SCORES WITHIN 12 MONTHS OF ENROLLMENT EXPANSION EXPANSION OF CWF SERVICES STRENGTHENED HUF'S FINANCIAL STABILITY FRAMEWORK -INTEGRATION OF WORKFORCE AND FINANCIAL EDUCATION INTO A NEW UNITY4TEENS HIGH SCHOOL COACHES PROVIDED THE FOUNDATION AND TOOLS FOR THEIR FUTURE SUCCESS THIS RESULTED IN THE RELEASE OF THE GUIDE2GOALS WEBSITE (WWW.GUIDE2GOALS.NET) CREATED BY PARTICIPANTS -INTEGRATION OF FINANCIAL EDUCATION INTO COMPRANDO RICO Y SANO -INTEGRATION OF FINANCIAL EDUCATION INTO CITIZENSHIP CLASSES -IN 2016, HUF AND BROWARD COUNTY'S FAMILY SUCCESS ADMINISTRATION STARTED WORKING TOGETHER AGAIN (AFTER 6 YEARS HIATUS) TO SERVE FAMILIES IN NEEDS OF FINANCIAL STABILITY NEW -LAUNCHED HUF'S FIRST HOUSING PROGRAM (FIRST-TIME HOMEBUYER) - FUNDED BY NCLR AND STATE FARM -LAUNCHED THE BRIDGE PROGRAM WHICH INCLUDES BOTH CUSTOMER SERVICE AND BANK TELLER TRAINING - FUNDED BY THE COMMUNITY FOUNDATION OF BROWARD COUNTY EMERGING ENTREPRENEURS (EE) PROGRAM - THE EMERGING ENTREPRENEURS PROGRAM CONTINUED TO PROVIDE TWO MAJOR OFFERINGS BETWEEN THE 5 SIMPLE STEPS PROGRAM FOR ASPIRING SMALL BUSINESS OWNERS, AS WELL AS SINGLE SUBJECT SMALL BUSINESS WORKSHOPS FOR EXISTING BUSINESS OWNERS THE PROGRAM PROVIDED 2 CYCLES OF THE 5 SIMPLE STEPS PROGRAM IN SPANISH AND SERVED 88 NEW ENTREPRENEURS ALSO, THE PROGRAM SERVED 575 CLIENTS THROUGH ITS SERIES OF 14 SINGLE SUBJECT WORKSHOPS IN SPANISH IN TOTAL, THE PROGRAM SERVED 663 NEW AND EXISTING ENTREPRENEURS IN ADDITION, 100% OF THE CLIENTS WERE OFFERED ACCESS TO BROWARD SCORE'S UNLIMITED MENTORSHIP PROGRAM THOSE WHO PARTICIPATED IN THE 5 SIMPLE STEPS PROGRAM HAD THE OPPORTUNITY TO ENGAGE WITH ACCION USA AND PROSPERA TO UNDERSTAND AND PREPARE THEMSELVES FOR MICRO-LENDING OPPORTUNITIES FOR THEIR NEW BUSINESSES 95% OF PARTICIPANTS AFFIRMED THAT THEY RECEIVED VALUABLE INFORMATION AND RESOURCES TO DETERMINE IF THEY WISH TO PURSUE THE DEVELOPMENT OF A SMALL BUSINESS VOLUNTEER INCOME TAX ASSISTANCE (VITA)/ FREE TAX PREPARATION - THE GOAL OF THE 2016 VITA PROGRAM WAS TO ELECTRONICALLY FILE A MINIMUM OF 5,800, 100% ERROR-FREE INCOME TAX RETURNS AND MAINTAIN A REJECTION RATE LESS THAN 9% ACROSS ALL HUF SITES IN 2016, THE VITA PROGRAM SERVED 5,816 LOW-MODERATE INCOME CLIENTS THE PROGRAM'S SECONDARY FOCUS WAS TO PROVIDE SERVICES TO LIMITED ENGLISH SPEAKERS ACCOMPLISHED BY AN EXPERIENCED, MULTICULTURAL STAFF AND VOLUNTEER FORCE IN 5 LANGUAGES (ENGLISH, SPANISH, CREOLE, PORTUGUESE AND SIGN LANGUAGE) 60% OF VITA CLIENTS WERE NON-HISPANIC (29.8% AFRICAN AMERICAN AND 31% WHITE) A TOTAL OF 6.3 MILLION IN FEDERAL TAX REFUNDS WERE CLAIMED ON RETURNS PREPARED AT THE VITA BROWARD COALITION SITES THE AVERAGE REFUND AMOUNT FOR 2016 WAS 1,531 VITA CLIENTS SERVED BY THE COALITION SITES SAVED A TOTAL OF 1.4 MILLION IN TAX PREPARATION FEES BY ACCESSING THE FREE SERVICE IN ORDER TO INCREASE CAPACITY IN SOME OF THE PROGRAM'S LARGEST SITES, FOUR COALITION TAX PREPARERS WERE ADDED TO THE STAFF AND DEPLOYED TO SUPPORT THE VITA TEAMS AT HISPANIC UNITY MAIN SITE, TAMARAC COMMUNITY CENTER, NORTH REGIONAL BROWARD COLLEGE LIBRARY AND THE NORTHWEST REGIONAL LIBRARY A COLLABORATION WITH THE EPILEPSY FOUNDATION HELPED TO RESOLVE MANY OF THE CHALLENGES FACED BY TAXPAYERS DUE TO ISSUES WITH THEIR 1095 FORMS RECEIVED FOR PURCHASING A QUALIFIED HEALTHCARE PLAN AS A RESULT OF THE AFFORDABLE CARE ACT (ACA) ALL CWF FUNDERS INCREASED THEIR FINANCIAL SUPPORT IN BOTH 2016 AND 2017 IN ORDER TO EXPAND SERVICES AND CLIENTS

4c (Code) (Expenses \$ 414,783 including grants of \$) (Revenue \$ 50,932) CITIZENSHIP, CIVIC ENGAGEMENT & EQUAL TREATMENT/OPPORTUNITY CIVIC ENGAGEMENT AND CITIZENSHIP CLASSES - IN 2016 HUF WAS THE RECIPIENT OF THE UNITED STATES CITIZENSHIP AND IMMIGRATION SERVICES (USCIS) GRANT FOR THE PERIOD OCTOBER 1, 2016 TO SEPTEMBER 30, 2018, THUS MAKING IT POSSIBLE TO CONTINUE PROVIDING THE CITIZENSHIP SERVICES AT A MINIMUM COST TO THOSE CLIENTS WHO QUALIFIED AND ENROLL IN THE CITIZENSHIP CLASSES MORE THAN 3,000 CLIENTS RECEIVED CITIZENSHIP CLASSES IN PARTNERSHIP WITH THE BROWARD COUNTY PUBLIC LIBRARY SYSTEM IN ADDITION, 260 STUDENTS WERE ACCEPTED FOR CITIZENSHIP CLASSES AT HUF DURING THIS REPORTING YEAR, HUF HAD ACTIVE PARTICIPATION FROM DIFFERENT SPEAKERS SUCH AS THE SUPERVISOR OF ELECTIONS, COUNTY COMMISSIONERS, USCIS SUPERVISORS AND OFFICERS AND STATE ELECTED OFFICIALS APPROXIMATELY 700 INSTRUCTION HOURS WERE DEVOTED BY OUR 9 VOLUNTEERS AT THE LIBRARIES IN MARCH 2016, HUF PARTICIPATED IN THE NEW AMERICAN'S CAMPAIGN (NAC) COALITION'S MEGA CITIZENSHIP WORKSHOP AT THE MIAMI MARLINS STADIUM AND ASSISTED MORE THAN 750 CUSTOMERS BY REVIEWING THEIR N-400S OVER 150 OF THOSE WHO ATTENDED THE WORKSHOP WERE REFERRED TO HUF FOR FURTHER ASSISTANCE IN COMPLETING THEIR N-400S THE PROGRAM ALSO EXPANDED THE CITIZENSHIP CLASSES AT THE LIBRARIES IN BROWARD COUNTY BY ADDING THE MARGATE CATHERINE YOUNG BRANCH LIBRARY THE FIRST CLASS STARTED ON SEPTEMBER 13, 2016, AND, IN OCTOBER 2016, HUF PARTNERED WITH THE NORTH MIAMI BEACH PUBLIC LIBRARY TO LAUNCH CITIZENSHIP CLASSES MORE THAN 850 "N-400" FORMS (APPLICATIONS FOR U S CITIZENSHIP) WERE SUBMITTED, 300 INDIVIDUALS UNDER THE POVERTY LEVEL RECEIVED FEE WAIVERS, WHICH SAVED THEM A TOTAL OF 204,000 IN APPLICATION FEES DUE TO HIGH DEMAND FOR NATURALIZATION SERVICES, HUF HIRED A PARALEGAL IN MAY 2016 AND SECURED FUNDING TO HIRE A SECOND PARALEGAL IN JANUARY 2017 MOREOVER, MAGALY ALVARADO, SENIOR PROGRAM MANAGER (SPR), WAS REACCREDITED AS BOARD OF IMMIGRATION APPEALS (BIA) REPRESENTATIVE VOTER REGISTRATION - HUF JOINED THE UNIVISION VE Y VOTA CAMPAIGN FOR THE ELECTORAL YEAR OF 2016 IN ADDITION, HUF AND NCLR WORKED TOGETHER AND PROVIDED VOTING REGISTRATION SERVICES THIS INITIATIVE HELPED HUF'S STAFF MEMBERS ENGAGE THE COMMUNITY IN THIS DEMOCRATIC PROCESS AS A RESULT MORE THAN 150 CITIZENS REGISTERED TO VOTE LEGAL AID SERVICE OF BROWARD COUNTY (PARTNER) - AS PART OF A YEAR-LONG PARTNERSHIP, LEGAL AID HAS BEEN PROVIDING FREE CIVIL LEGAL SERVICES TO LOW-INCOME RESIDENTS OF BROWARD COUNTY AT HISPANIC UNITY'S MAIN OFFICE EVERY WEEK, A REPRESENTATIVE PROVIDES ASSISTANCE IN THE AREAS OF HOUSING (TENANT ISSUES, EVICTIONS), DIVORCE WITH DOMESTIC VIOLENCE, DENIAL OF UNEMPLOYMENT BENEFITS, DISABILITY, AND DENIAL OF SOCIAL SECURITY BENEFITS IN ADDITION, LEGAL AID BEGAN PROVIDING NATURALIZATION APPLICATION SERVICES TO CLIENTS ENROLLED IN HUF'S CITIZENSHIP PROGRAM OVER 120 CLIENTS RECEIVED LEGAL SERVICES DURING 2016 HUF HOSTED AN ESTATE PLANNING CLINIC IN PARTNERSHIP WITH LEGAL AID SERVICE AND AN ESTATE PLANNING GROUP FROM THE BROWARD BAR ATTORNEYS ASSISTED MORE THAN 15 HUF CLIENTS IN FOUR LANGUAGES

4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,629,548

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		No
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, sub-questions (1a-13c), Yes, and No. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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 [X]

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 (17); 1b Enter the number of voting members included in line 1a, above, who are independent (17); 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? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b 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? a The organization's CEO, Executive Director, or top management official (Yes); b 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

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (FL); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [X] Own website, [X] Another's website, [X] 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 (VIRGINIA CIELO-BASURTO CFO 5840 JOHNSON STREET HOLLYWOOD, FL 33021 (954) 964-8884)

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			
(1) LILY PARDO CHAIR	2 00	X		X				0	0	0
(2) GUILLERMO GOMEZ CHAIR ELECT	2 00	X		X				0	0	0
(3) JORGE GONZALEZ TREASURER	2 00	X		X				0	0	0
(4) CHARLES TATELBAUM SECRETARY	2 00	X		X				0	0	0
(5) STEVE SAMPIER PAST CHAIR	2 00	X		X				0	0	0
(6) MELIDA AKITI DIRECTOR	2 00	X						0	0	0
(7) ABRAHAM CARDENAS DIRECTOR	2 00	X						0	0	0
(8) MALENA DORN DIRECTOR	2 00	X						0	0	0
(9) BARBARA GREVIOR DIRECTOR	2 00	X						0	0	0
(10) JOHN GUERRERO DIRECTOR	2 00	X						0	0	0
(11) ROLANDO J MORA DIRECTOR	2 00	X						0	0	0
(12) CHRISTINA PARADOWSKI DIRECTOR	2 00	X						0	0	0
(13) EMMA PFISTER DIRECTOR	2 00	X						0	0	0
(14) AL QUINTANA DIRECTOR	2 00	X						0	0	0
(15) LUCIA RODRIGUEZ DIRECTOR	2 00	X						0	0	0
(16) ANGIE J STONE DIRECTOR	2 00	X						0	0	0
(17) JOSE TARAFI DIRECTOR	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOSIE BACALLAO PRESIDENT/ C	40 00			X				142,487	0	0
(19) LUIS F PINZON VP/DIR OF PR	40 00			X				112,377	0	0
(20) VIRGINIA K CIELO COO/CFO	40 00			X				103,017	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								357,881		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **3**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SAFE WAY MAINTENANCE INC 510 NORTH ROCK ISLAND ROAD APT 5 MARGATE, FL 33063	BLDG MAINT & IM	115,534

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 ▶ **1**

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					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,811,550				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	775,454				
	g Noncash contributions included in lines 1a-1f \$ _____		8,943				
	h Total. Add lines 1a-1f		4,587,004				
Program Service Revenue		Business Code					
	2a EDUCATIONAL SERVICES		130,401	130,401			
	b CIVIC ENGAGEMENT		50,932	50,932			
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		181,333					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		197			197	
	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)					
		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					
		c Gain or (loss)					
		d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	83,785				
		b Less direct expenses	b	19,891			
		c Net income or (loss) from fundraising events		63,894			
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
11a OTHER INCOME		243,539			243,539		
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d		243,539					
12 Total revenue. See Instructions		5,075,967	181,333		243,736		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
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.	357,881	357,881		
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.	3,090,650	2,984,073	94,411	12,166
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.				
11 Fees for services (non-employees)				
a Management.				
b Legal.				
c Accounting.	22,992		22,992	
d Lobbying.				
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).	202,954	195,809	6,761	384
12 Advertising and promotion.	25,050	22,545		2,505
13 Office expenses.	203,580	197,516	4,097	1,967
14 Information technology.	47,570	46,567	364	639
15 Royalties.				
16 Occupancy.	275,734	273,074	2,265	395
17 Travel.	19,415	19,151	252	12
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	43,596	42,304	553	739
20 Interest.	4,857	4,829	18	10
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	116,635	115,585	933	117
23 Insurance.	41,162	41,008	48	106
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 PROGRAM EXPENSES	316,483	316,483		
b IN-KIND	8,943	8,943		
c EMPLOYEE EVENTS	4,200	3,780	358	62
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	4,781,702	4,629,548	133,052	19,102
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	654,093	1	988,828
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	729,240	3	1,085,923
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	33,314	9	44,767
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	2,768,014		
	b Less accumulated depreciation	1,302,103		
		1,494,344	10c	1,465,911
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	5,564	15	19,068	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,916,555	16	3,604,497	
Liabilities	17 Accounts payable and accrued expenses	172,784	17	266,842
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	303,701	23	794,003
	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	190,683	25	
	26 Total liabilities. Add lines 17 through 25	667,168	26	1,060,845
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	1,030,904	27	1,045,897
	28 Temporarily restricted net assets	1,218,483	28	1,497,755
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. 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	2,249,387	33	2,543,652
	34 Total liabilities and net assets/fund balances	2,916,555	34	3,604,497

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	5,075,967
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,781,702
3	Revenue less expenses Subtract line 2 from line 1	3	294,265
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,249,387
5	Net unrealized gains (losses) on investments	5	
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,543,652

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>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</p>	2c	Yes	
<p>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?</p>	3a		No
<p>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</p>	3b		

Additional Data

Software ID:

Software Version:

EIN: 59-2230272

Name: HISPANIC UNITY OF FLORIDA INC

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2016

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
HISPANIC UNITY OF FLORIDA INC

Employer identification number

59-2230272

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) and 170(b)(1)(A)(vi)

(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)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	3,652,327	4,203,514	3,553,014	3,470,471	4,587,004	19,466,330
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,652,327	4,203,514	3,553,014	3,470,471	4,587,004	19,466,330
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)						
6	Public support. Subtract line 5 from line 4						19,466,330

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7	Amounts from line 4	3,652,327	4,203,514	3,553,014	3,470,471	4,587,004	19,466,330
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	419	333	996	48	197	1,993
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	270,772	146,317	7,890	109,545	327,324	861,848
11	Total support. Add lines 7 through 10						20,330,171
12	Gross receipts from related activities, etc. (see instructions)					12	1,141,965

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 2016 (line 6, column (f) divided by line 11, column (f))	14	95.750 %
15	Public support percentage for 2015 Schedule A, Part II, line 14	15	95.640 %

16a 33 1/3% support test—2016. 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—2015. 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—2016. 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—2015. 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)2012	(b)2013	(c)2014	(d)2015	(e)2016	(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)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15	Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2015 Schedule A, Part III, line 17	18	
19a	33 1/3% support tests—2016. 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 ► <input type="checkbox"/>		
b	33 1/3% support tests—2015. 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 ► <input type="checkbox"/>		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

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>		
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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7 <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 2016 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-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

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
PART II, LINE 10	SPECIAL EVENTS 564,685 MISCELLANEOUS INCOME 297,163

Schedule A Form 990 of 990-E 2016

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2016

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization HISPANIC UNITY OF FLORIDA INC

Employer identification number 59-2230272

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

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

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

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply) - Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure; 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; 2a Total number of conservation easements; 2b Total acreage restricted by conservation easements; 2c Number of conservation easements on a certified historic structure included in (a); 2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register; 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year; 4 Number of states where property subject to conservation easement is located; 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No); 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No); 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

Table with 2 columns: Description, Amount. Rows include: 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; 1b 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | | |
| (ii) related organizations | | |
| 3a(ii) | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 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		458,106		458,106
b Buildings		1,789,445	922,173	867,272
c Leasehold improvements				
d Equipment		368,725	321,605	47,120
e Other		151,738	58,325	93,413
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,465,911

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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

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	5,103,691
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	27,724	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	27,724
3	Subtract line 2e from line 1		3	5,075,967
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		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	5,075,967

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	4,809,426
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	27,724	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	27,724
3	Subtract line 2e from line 1		3	4,781,702
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		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	4,781,702

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:

Software Version:

EIN: 59-2230272

Name: HISPANIC UNITY OF FLORIDA INC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	UNCERTAIN TAX POSITION GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2016 THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS IF THE ORGANIZATION WERE TO INCUR AN INCOME TAX LIABILITY IN THE FUTURE, INTEREST AND PENALTIES WOULD BE REPORTED AS INCOME TAXES THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS MANAGEMENT BELIEVES THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR THE YEARS PRIOR TO 2013

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

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2016

**Open to Public
Inspection**

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
HISPANIC UNITY OF FLORIDA INC

Employer identification number
59-2230272

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)
		ENTREPRENEURIAL (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
1	Gross receipts	81,260			81,260
2	Less Contributions				
3	Gross income (line 1 minus line 2)	81,260			81,260
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	18,241			18,241
10	Direct expense summary Add lines 4 through 9 in column (d) ▶				18,241
11	Net income summary Subtract line 10 from line 3, column (d) ▶				63,019

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 | 13a | _____ % |
| b | An outside facility | 13b | _____ % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

Return Reference

Explanation

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.

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

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service
 Name of the organization
 HISPANIC UNITY OF FLORIDA INC

Employer identification number

59-2230272

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	<p>OUR COUNTRY IS A BEACON OF FREEDOM AND OPPORTUNITY AND HISPANIC UNITY OF FLORIDA, INC (HUF) IS LIKE THE SOUTHERN OUTPOST OF ELLIS ISLAND, WELCOMING NEWCOMERS TO OUR COUNTRY AND GUIDING THEM ON THEIR OFTEN DIFFICULT, BUT ALWAYS HOPEFUL, LIFE-LONG PROCESS OF LEARNING WHAT IT MEANS TO BE AN AMERICAN THIS IS AT THE HEART OF OUR WORK HUF WAS ORIGINALLY FOUNDED IN 1982 BY COMMUNITY LEADERS TO GUIDE THESE ASPIRING AMERICANS ON THEIR JOURNEY TO THEIR AMERICAN DREAM AND TO EASE THEIR ACCULTURATION PROCESS TODAY, HUF IS BROWARD COUNTY'S LARGEST 501(C) (3) AGENCY DEDICATED TO THE IMMIGRANT POPULATION FOR 35 YEARS, THIS AGENCY HAS LEFT AN INDELIBLE MARK ON THE MORE THAN 400,000 INDIVIDUALS AND FAMILIES SERVED, AND CONTINUES TO DELIVER ON ITS MISSION OF EMPOWERING IMMIGRANTS AND OTHERS TO BECOME SELF-SUFFICIENT, PRODUCTIVE AND CIVICALLY ENGAGED WITH 12 PROGRAMS AND MORE THAN 30 SERVICES OFFERED IN 4 LANGUAGES, HUF IS ABLE TO SERVE SOUTH FLORIDA'S DIVERSE COMMUNITY TWO-THIRDS OF HUF'S CLIENTS HAIL FROM LATIN NATIONS AND THE CARIBBEAN, COMPLEMENTED BY AMERICAN-BORN CLIENTS, INCLUDING AFRICAN-AMERICANS, CAUCASIANS AND OTHERS IN 2016, HUF SERVED 15,000 CLIENTS, FROM TODDLERS TO ADULTS, FROM MORE THAN 25 COUNTRIES AT 8 PERMANENT BROWARD COUNTY SITES, 18 SEASONAL TAX PREPARATION SITES AND 11 CITIZENSHIP CLASSROOM FACILITIES HUF FOCUSED ON THREE MAJOR AREAS LANGUAGE & EDUCATION, ECONOMIC MOBILITY & ENTREPRENEURSHIP, AND CITIZENSHIP & CIVIC ENGAGEMENT, AND ALSO PROVIDED SERVICES IN THE AREAS OF HEALTH & WELL BEING, EQUAL TREATMENT & OPPORTUNITY AND ADVOCACY IN 2016, NATIONAL COUNCIL OF LA RAZA (NCLR) - THE NATION'S LARGEST LATINO CIVIL RIGHTS AND ADVOCACY ORGANIZATION IN THE COUNTRY DEDICATED TO THE IMMIGRANT COMMUNITY - RECOGNIZED HUF AS AFFILIATE OF THE YEAR</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	<p>UNITY 4KIDS PRESCHOOL - IN 2016, UNITY 4KIDS (U4K) EARLY LEARNING CENTER SERVED 36 CHILDREN AND 62 PARENTS BY THE END OF THE YEAR, 97% (35 OUT OF 36) OF THE CHILDREN DEMONSTRATED GAINS IN LANGUAGE, SOCIAL-EMOTIONAL, AND PHYSICAL, COGNITIVE, LITERACY, MATHEMATICS, SCIENCE & TECHNOLOGY, SOCIAL STUDIES, ART AND ENGLISH LANGUAGE ACQUISITION AS DEMONSTRATED BY THE TEACHER STRATEGIES GOLD (TSG) ASSESSMENT THE STUDENT WHO DID NOT DEMONSTRATE GAINS (1 OUT OF 36, 3%) PRESENTED DEVELOPMENTAL CHALLENGES AND WAS APPROPRIATELY REFERRED ADDITIONALLY, VOLUNTARY PREKINDERGARTEN (VPK) STUDENTS RECEIVED THEIR VPK PRE- AND POST- ASSESSMENTS AND 91% (10 OUT OF 11) OF THE CHILDREN DEMONSTRATED MEETING OR EXCEEDING EXPECTATIONS IN THE PHONOLOGICAL AWARENESS, PRINT KNOWLEDGE, ORAL LANGUAGE/VOCABULARY AND MATH AREAS THE STUDENT WHO DID NOT DEMONSTRATE GAINS (1 OUT OF 11, 9%) PRESENTED DEVELOPMENTAL CHALLENGES AND WAS APPROPRIATELY REFERRED TO THE CHILDREN DIAGNOSTIC CENTER FOR EVALUATION IN JANUARY 2016, UNITY 4KIDS BECAME A GOLD SEAL ACCREDITED SCHOOL THROUGH THE NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION (NECPA) NECPA WAS ESTABLISHED IN 1991 TO ENCOURAGE QUALITY AND RECOGNIZE EXCELLENCE IN EARLY CHILDHOOD PROGRAMS THROUGHOUT THE UNITED STATES AND OTHER COUNTRIES THE U4K CENTER ALSO RECEIVED THE RESULTS OF THE STUDENTS READINESS RATE FROM THE DEPARTMENT OF EDUCATION INDICATING THAT 100% OF UNITY 4KIDS VPK- STUDENTS FOR THE 2014- 2015 SCHOOL YEAR WERE READY FOR KINDERGARTEN</p> <p>UNITY 4TEENS MIDDLE SCHOOLS - FROM JANUARY THROUGH DECEMBER 2016 THE UNITY 4TEENS (U4T) SERVED A TOTAL OF 357 UNDUPLICATED STUDENTS FROM APOLLO, ATTUCKS, MCNICOL AND OLSEN MIDDLE SCHOOLS THE PROGRAM PROVIDED ACADEMIC AND ENRICHMENT ACTIVITIES AS WELL AS CASE MANAGEMENT SERVICES FOR THE ENTIRE FAMILY IN 2016, THE U4T PROGRAM CONTINUED TO OFFER THE FREE "PADRES COMPROMETIDOS" (ENGAGED PARENTS) WORKSHOPS TO INCREASE PARENT ENGAGEMENT IN THEIR CHILDREN'S EDUCATION, AS WELL AS ENCOURAGE THEM TO BECOME FAMILIAR WITH THE SCHOOL SYSTEM IN GENERAL DURING 2016, U4T RECEIVED NEW FUNDING FROM THE AETNA FOUNDATION, TARGET AND THE CITY OF HOLLYWOOD TO ENHANCE THE NUTRITION AND FITNESS COMPONENT "A SIZE HEALTHY" ASH PROGRAM STUDENTS NOW SEE THE RELATIONSHIP BETWEEN WHAT THEY PLANT IN THE GARDEN, THE DAILY PHYSICAL ACTIVITY, THE COOKING AND THE NUTRITION WORKSHOPS AS A RESULT OF ALL THESE COMPONENTS WORKING TOGETHER, THE FOLLOWING SUCCESSFUL OUTCOMES WERE OBTAINED DURING 2016 -100% OF PARTICIPANTS DID NOT OBTAIN A NEW LAW VIOLATION -100% OF PARTICIPANTS DID NOT BECOME OR CAUSE PREGNANCY -100% OF PARTICIPANTS DID NOT USE ALCOHOL AND/OR DRUGS -75% OF PARTICIPANTS IMPROVED SCHOOL GRADES AND/OR ATTENDANCE (JANUARY THROUGH JUNE) IN 2016, THE PROGRAM RENEWED ITS CONTRACT WITH THE CHILDREN'S SERVICE COUNCIL OF BROWARD COUNTY (CSC) AND INCREASED FUNDING BY 17% TO SERVE AN ADDITIONAL 37 STUDENTS (257 VS 220) UNITY 4TEENS HIGH SCHOOLS - IN 2016, THE UNITY 4TEENS (U4T) HIGH SCHOOL PROGRAM SERVED MORE THAN</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>500 HIGH SCHOOL STUDENTS (INCLUDED ONLY STUDENTS WITH A MINIMUM ATTENDANCE OF 30 DAYS DURING THE ENTIRE SCHOOL YEAR) U4T HIGH SCHOOL STUDENTS ALSO LEARNED TO DEVELOP SMART (SPECIFIC, MEASURABLE, ATTAINABLE, RELEVANT & TIME-BOUND) GOALS STUDENTS LEARNED FINANCIAL LITERACY SKILLS THAT WILL HELP THEM IN COLLEGE, CAREER, AND BEYOND JUNIORS AND SENIORS WHO ENROLLED IN THE COLLEGE AND CAREER READINESS (CCR) COMPONENT RECEIVED INTENSE TRAINING AND SUPPORT TO PREPARE THEM FOR THE AMERICAN COLLEGE TESTING (ACT) EXAM ACTIVITIES DURING THIS PAST YEAR INCLUDED HEALTH AND WELLNESS, GRAPHICS AND WEB DESIGN, CULTURAL ARTS, COMPUTER GAME DESIGN, HISTORY OF THE AMERICAS, HOMEWORK ASSISTANCE, TUTORING, COMMUNITY SERVICE LEARNING, PREVENTIVE EDUCATION, ACT/SAT PREPARATION, AND COLLEGE AND CAREER READINESS MIRAMAR HIGH SCHOOL'S TEEN OUTREACH PROGRAM (TOP) CLUB CONTRIBUTED 46 COMMUNITY SERVICE HOURS TO BENEFIT THE SCHOOL AND THE COMMUNITY, EXCEEDING THE PROGRAM'S REQUIRED 20 HOURS THIS INCLUDED A SUBSTANTIAL CLOTHING DRIVE FOR HAITI THE U4T HIGH SCHOOL PROGRAM WAS SUCCESSFUL IN ACHIEVING HIGH STUDENT IMPROVEMENT AND MEETING CONTRACT REQUIREMENTS FOR THE 2015/16 PROGRAM YEAR -91% OF PARTICIPANTS DECREASED THEIR NUMBER OF UNEXCUSED ABSENCES -100% OF PARTICIPANTS DECREASED EXTERNAL SUSPENSIONS -79% OF PARTICIPANTS IMPROVED READING -75% OF PARTICIPANTS IMPROVED MATH -72% OF PARTICIPANTS IMPROVED SCIENCE HOLLYWOOD HILLS HIGH - 95% OF PARTICIPANTS PARTICIPATED IN THE GUIDE2GOALS (G2G) PROGRAM AT HOLLYWOOD HILLS HIGH SCHOOL, WHICH SUCCESSFULLY ENDED IN DECEMBER 2016 THE INITIATIVE WAS DIVIDED INTO FOUR COHORTS, THE LAST COHORT INCLUDED PREVIOUS PARTICIPANTS WHO SERVED AS MENTORS TO NEW MEMBERS THROUGHOUT THE WORK OF THE FOUR COHORTS AND THE DEDICATION OF THE STAFF, STUDENTS WERE ABLE TO FINALIZE THE AMBITIOUS COMMUNITY SERVICE ACTIVITY THAT WAS INITIALLY PROPOSED AS A SMART PHONE APPLICATION AND, AT THE END, BECAME A COMPREHENSIVE WEBSITE STUDENTS ALSO ENJOYED INFORMATIVE AND GUIDED TRIPS TO DIFFERENT COLLEGES AND UNIVERSITIES IN THE STATE (IE NOVA SOUTHEASTERN UNIVERSITY, BROWARD COLLEGE, FIU, FAU, FSU, UF, AND UCF AMONG OTHERS) FAMILY STRENGTHENING - IN 2016, HUF COMPLETED SIX SESSION CYCLES AT TWO LOCATIONS - BROWARD COUNTY PUBLIC SCHOOLS AND AT HUF THE FAMILY STRENGTHENING PROGRAM (FSP) SERVED A TOTAL OF 87 FAMILIES, WHICH INCLUDED 87 CHILDREN AND 130 PARENTS THE MAJORITY OF FAMILIES 85% (74 OUT OF 87) FULLY AND SUCCESSFULLY COMPLETED THE FOUR COMPONENTS OF THE FSP FAMILIES HAD THE OPPORTUNITY TO ENJOY ROLE PLAY, DISCUSSION, AND EXPRESSIVE ART ACTIVITIES TO BUILD POSITIVE AND NURTURING RELATIONSHIPS ADDITIONALLY, PARENTS COMPLETED THE PRE- & POST ADULT-ADOLESCENT PARENTING INVENTORY (AAPI-2) ASSESSMENT AND 100% OF THE FAMILIES THAT PARTICIPATED AND COMPLETED THE PROGRAM DEMONSTRATED IMPROVEMENT IN THEIR APPROPRIATE EXPECTATIONS, EMPATHY, DISCIPLINE, FAMILY ROLES AND INDEPENDENCE 15% (13 OUT OF 87) OF FAMILIES PARTICIPATED IN ONLY THREE SESSIONS AND DID NOT WANT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	T TO CONTINUE FOR VARIOUS REASONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4B</p>	<p>-COMPRANDO RICO Y SANO - 800 PARTICIPANTS ATTENDED THE "CHARLAS" (GOAL 600 - 1,200) AND 15 GROCERY TOURS WERE CONDUCTED (GOAL 15 TOURS) WORKFORCE DEVELOPMENT -70% OF PARTICIPANTS ACQUIRED EMPLOYMENT OR A BETTER JOB (GOAL 60%) -30% RETAINED THEIR EMPLOYMENT FOR A MINIMUM OF THREE MONTHS (GOAL 35%) FINANCIAL CAPABILITY AND WEALTH BUILDING -100% OF THE PARTICIPANTS WHO ATTENDED THE 5-DAY CWF WORKSHOPS LEARNED ABOUT BUDGETING, SAVING, AND HOW TO MAKE THE RIGHT CHOICE WHEN CHOOSING A BANKING PRODUCT OR ACCEPTING A CREDIT CARD OFFER -70% OF EMPLOYED PARTICIPANTS REDUCED DEBT AND/OR IMPROVED CREDIT SCORES WITHIN 12 MONTHS OF ENROLLMENT EXPANSION EXPANSION OF CWF SERVICES STRENGTHENED HUF'S FINANCIAL STABILITY FRAMEWORK -INTEGRATION OF WORKFORCE AND FINANCIAL EDUCATION INTO A NEW UNITY4TEENS HIGH SCHOOL COACHES PROVIDED THE FOUNDATION AND TOOLS FOR THEIR FUTURE SUCCESS THIS RESULTED IN THE RELEASE OF THE GUIDE2GOALS WEBSITE (WWW GUIDE2GOALS NET) CREATED BY PARTICIPANTS -INTEGRATION OF FINANCIAL EDUCATION INTO COMPRANDO RICO Y SANO -INTEGRATION OF FINANCIAL EDUCATION INTO CITIZENSHIP CLASSES -IN 2016, HUF AND BROWARD COUNTY'S FAMILY SUCCESS ADMINISTRATION STARTED WORKING TOGETHER AGAIN (AFTER 6 YEARS HIATUS) TO SERVE FAMILIES IN NEEDS OF FINANCIAL STABILITY NEW -LAUNCHED HUF'S FIRST HOUSING PROGRAM (FIRST-TIME HOMEBUYER) - FUNDED BY NCLR AND STATE FARM -LAUNCHED THE BRIDGE PROGRAM WHICH INCLUDES BOTH CUSTOMER SERVICE AND BANK TELLER TRAINING - FUNDED BY THE COMMUNITY FOUNDATION OF BROWARD COUNTY EMERGING ENTREPRENEURS (EE) PROGRAM - THE EMERGING ENTREPRENEURS PROGRAM CONTINUED TO PROVIDE TWO MAJOR OFFERINGS BETWEEN THE 5 SIMPLE STEPS PROGRAM FOR ASPIRING SMALL BUSINESS OWNERS, AS WELL AS SINGLE SUBJECT SMALL BUSINESS WORKSHOPS FOR EXISTING BUSINESS OWNERS THE PROGRAM PROVIDED 2 CYCLES OF THE 5 SIMPLE STEPS PROGRAM IN SPANISH AND SERVED 88 NEW ENTREPRENEURS ALSO, THE PROGRAM SERVED 575 CLIENTS THROUGH ITS SERIES OF 14 SINGLE SUBJECT WORKSHOPS IN SPANISH IN TOTAL, THE PROGRAM SERVED 663 NEW AND EXISTING ENTREPRENEURS IN ADDITION, 100% OF THE CLIENTS WERE OFFERED ACCESS TO BROWARD SCORE'S UNLIMITED MENTORSHIP PROGRAM THOSE WHO PARTICIPATED IN THE 5 SIMPLE STEPS PROGRAM HAD THE OPPORTUNITY TO ENGAGE WITH ACCION USA AND PROSPERA TO UNDERSTAND AND PREPARE THEMSELVES FOR MICRO-LENDING OPPORTUNITIES FOR THEIR NEW BUSINESSES 95% OF PARTICIPANTS AFFIRMED THAT THEY RECEIVED VALUABLE INFORMATION AND RESOURCES TO DETERMINE IF THEY WISH TO PURSUE THE DEVELOPMENT OF A SMALL BUSINESS VOLUNTEER INCOME TAX ASSISTANCE (VITA)/ FREE TAX PREPARATION - THE GOAL OF THE 2016 VITA PROGRAM WAS TO ELECTRONICALLY FILE A MINIMUM OF 5,800, 100% ERROR-FREE INCOME TAX RETURNS AND MAINTAIN A REJECTION RATE LESS THAN 9% ACROSS ALL HUF SITES IN 2016, THE VITA PROGRAM SERVED 5,816 LOW-MODERATE INCOME CLIENTS THE PROGRAM'S SECONDARY FOCUS WAS TO PROVIDE SERVICES TO LIMITED ENGLISH SPEAKERS ACCOMPLISHED BY AN EXPERIENCED, MULTICULTURAL STAFF AND VOLUNTEER FORCE IN 5 LANGUAGES</p>

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FORM 990, PAGE 2, PART III, LINE 4B	AGES (ENGLISH, SPANISH, CREOLE, PORTUGUESE AND SIGN LANGUAGE) 60% OF VITA CLIENTS WERE NON-HISPANIC (29.8% AFRICAN AMERICAN AND 31% WHITE) A TOTAL OF 6.3 MILLION IN FEDERAL TAX REFUNDS WERE CLAIMED ON RETURNS PREPARED AT THE VITA BROWARD COALITION SITES THE AVERAGE REFUND AMOUNT FOR 2016 WAS 1,531 VITA CLIENTS SERVED BY THE COALITION SITES SAVED A TOTAL OF 1.4 MILLION IN TAX PREPARATION FEES BY ACCESSING THE FREE SERVICE IN ORDER TO INCREASE CAPACITY IN SOME OF THE PROGRAM'S LARGEST SITES, FOUR COALITION TAX PREPARERS WERE ADDED TO THE STAFF AND DEPLOYED TO SUPPORT THE VITA TEAMS AT HISPANIC UNITY MAIN SITE, TAMARAC COMMUNITY CENTER, NORTH REGIONAL BROWARD COLLEGE LIBRARY AND THE NORTHWEST REGIONAL LIBRARY A COLLABORATION WITH THE EPILEPSY FOUNDATION HELPED TO RESOLVE MANY OF THE CHALLENGES FACED BY TAXPAYERS DUE TO ISSUES WITH THEIR 1095 FORMS RECEIVED FOR PURCHASING A QUALIFIED HEALTHCARE PLAN AS A RESULT OF THE AFFORDABLE CARE ACT (ACA) ALL CWF FUNDERS INCREASED THEIR FINANCIAL SUPPORT IN BOTH 2016 AND 2017 IN ORDER TO EXPAND SERVICES AND CLIENTS

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FORM 990, PAGE 2, PART III, LINE 4C	<p>HAD ACTIVE PARTICIPATION FROM DIFFERENT SPEAKERS SUCH AS THE SUPERVISOR OF ELECTIONS, COUNTY COMMISSIONERS, USCIS SUPERVISORS AND OFFICERS AND STATE ELECTED OFFICIALS APPROXIMATELY 700 INSTRUCTION HOURS WERE DEVOTED BY OUR 9 VOLUNTEERS AT THE LIBRARIES IN MARCH 2016, HUF PARTICIPATED IN THE NEW AMERICAN'S CAMPAIGN (NAC) COALITION'S MEGA CITIZENSHIP WORKSHOP AT THE MIAMI MARLINS STADIUM AND ASSISTED MORE THAN 750 CUSTOMERS BY REVIEWING THEIR N-400S OVER 150 OF THOSE WHO ATTENDED THE WORKSHOP WERE REFERRED TO HUF FOR FURTHER ASSISTANCE IN COMPLETING THEIR N-400S THE PROGRAM ALSO EXPANDED THE CITIZENSHIP CLASSES AT THE LIBRARIES IN BROWARD COUNTY BY ADDING THE MARGATE CATHERINE YOUNG BRANCH LIBRARY THE FIRST CLASS STARTED ON SEPTEMBER 13, 2016, AND, IN OCTOBER 2016, HUF PARTNERED WITH THE NORTH MIAMI BEACH PUBLIC LIBRARY TO LAUNCH CITIZENSHIP CLASSES MORE THAN 850 "N-400" FORMS (APPLICATIONS FOR U S CITIZENSHIP) WERE SUBMITTED, 300 INDIVIDUALS UNDER THE POVERTY LEVEL RECEIVED FEE WAIVERS, WHICH SAVED THEM A TOTAL OF 204,000 IN APPLICATION FEES DUE TO HIGH DEMAND FOR NATURALIZATION SERVICES, HUF HIRED A PARALEGAL IN MAY 2016 AND SECURED FUNDING TO HIRE A SECOND PARALEGAL IN JANUARY 2017 MOREOVER, MAGALY ALVARADO, SENIOR PROGRAM MANAGER (SPR), WAS REACCREDITED AS BOARD OF IMMIGRATION APPEALS (BIA) REPRESENTATIVE VOTER REGISTRATION - HUF JOINED THE UNIVISION VE Y VOTA CAMPAING FOR THE ELECTORAL YEAR OF 2016 IN ADDITION, HUF AND NCLR WORKED TOGETHER AND PROVIDED VOTING REGISTRATION SERVICES THIS INITIATIVE HELPED HUF'S STAFF MEMBERS ENGAGE THE COMMUNITY IN THIS DEMOCRATIC PROCESS AS A RESULT MORE THAN 150 CITIZENS REGISTERED TO VOTE LEGAL AID SERVICE OF BROWARD COUNTY (PARTNER) - AS PART OF A YEAR-LONG PARTNERSHIP, LEGAL AID HAS BEEN PROVIDING FREE CIVIL LEGAL SERVICES TO LOW-INCOME RESIDENTS OF BROWARD COUNTY AT HISPANIC UNITY'S MAIN OFFICE EVERY WEEK, A REPRESENTATIVE PROVIDES ASSISTANCE IN THE AREAS OF HOUSING (TENANT ISSUES, EVICTIONS), DIVORCE WITH DOMESTIC VIOLENCE, DENIAL OF UNEMPLOYMENT BENEFITS, DISABILITY, AND DENIAL OF SOCIAL SECURITY BENEFITS IN ADDITION, LEGAL AID BEGAN PROVIDING NATURALIZATION APPLICATION SERVICES TO CLIENTS ENROLLED IN HUF'S CITIZENSHIP PROGRAM OVER 120 CLIENTS RECEIVED LEGAL SERVICES DURING 2016 HUF HOSTED AN ESTATE PLANNING CLINIC IN PARTNERSHIP WITH LEGAL AID SERVICE AND AN ESTATE PLANNING GROUP FROM THE BROWARD BAR ATTORNEYS ASSISTED MORE THAN 15 HUF CLIENTS IN FOUR LANGUAGES</p>

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FORM 990, PAGE 6, PART VI, LINE 11B	THE BOARD IS PROVIDED A COPY OF THE IRS FORM 990 AFTER REVIEW AND APPROVAL BY THE FINANCE COMMITTEE BUT PRIOR TO THE FILING WITH THE INTERNAL REVENUE SERVICE THE CFO AND THE FINANCE COMMITTEE REVIEW THE 990 IN DETAIL AND ALLOW ADEQUATE TIME FOR BOARD REVIEW, INPUT AND APPROVAL

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FORM 990, PAGE 6, PART VI, LINE 12C	DIRECTORS SERVE VOLUNTARILY AND IN THE BEST INTEREST OF HISPANIC UNITY OF FLORIDA, INC ACTIONS THAT ARE SELF-SERVING, WHETHER OF A PERSONAL OR FINANCIAL NATURE, WOULD BE CAUSE FOR IMMEDIATE REMOVAL FROM THE BOARD ON AN ANNUAL BASIS EACH BOARD MEMBER AND EACH KEY EMPLOYEE READS AND SIGNS A FORM AGREEING TO ABIDE BY THE BOARD-APPROVED CONFLICT OF INTEREST POLICY ALL BOARD MEMBERS ALSO SIGN AN ATTESTATION TO A ROBUST CODE OF ETHICS

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FORM 990, PAGE 6, PART VI, LINE 15A	THE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER, AND OTHER OFFICERS AND KEY EMPLOYEES (I E , CHIEF FINANCIAL OFFICER, CHIEF DEVELOPMENT OFFICER, AND DIRECTOR OF PROGRAMS) INCLUDES A TWO-PART ANALYSIS CONDUCTED FIRST BY THE FINANCE COMMITTEE FOR RECOMMENDATION AND APPROVAL TO THE BOARD OF DIRECTORS FIRST, THE JOB DESCRIPTION IS ANALYZED FOR THE PURPOSES OF SELECTING LOCAL LIKE-KIND ORGANIZATIONS TO USE THE COMPENSATION OF THOSE COMPARABLE POSITIONS THE MOST RELEVANT FACTORS IN SELECTING COMPARABLES INCLUDE THE TYPE OF SERVICES AND PROGRAMS OFFERED, THE ANNUAL BUDGET AND GEOGRAPHICAL LOCATION SECOND, THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA OF THE COMPARABLE LIKE-KIND ORGANIZATIONS THESE TWO STEPS ENSURE THAT THE COMPENSATION IS WITHIN MARKET

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FORM 990, PAGE 6, PART VI, LINE 15B	AS STATED FOR LINE 15A ABOVE

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FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S 990 AND, IF APPLICABLE, THE 990-T IS AVAILABLE TO THE PUBLIC ANYTIME 1) ON THE ORGANIZATION'S WEBSITE, WWW HISPANICUNITY ORG, 2) ON GUIDESTAR'S WEBSITE, WWW GUIDESTAR ORG, OR 3) UPON WRITTEN OR VERBAL REQUEST, WHICH IS COMPLIED WITH BY PROVIDING A COPY BY U S MAIL OR EMAIL TO THE REQUESTOR