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EXTENDED TO MAY 15, 2018

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

1706

A For the 2016 calendar year, or tax year beginning JUL 1, 2016 and ending JUN 30, 2017

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

C Name of organization: UNITED WAY SUNCOAST, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 5201 W KENNEDY BLVD — Room/suite: 600

City or town, state or province, country, and ZIP or foreign postal code: TAMPA, FL 33609

D Employer identification number: 59-3725701

E Telephone number: (813)274-0900

G Gross receipts $ 33,610,226.

F Name and address of principal officer: SUZANNE MCCORMICK
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW.UNITEDWAYSUNCOAST.ORG

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

L Year of formation: 2001 **M** State of legal domicile: FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO PROVIDE LEADERSHIP THAT IMPROVES LIVES AND CREATES LASTING COMMUNITY CHANGE

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	91
6	Total number of volunteers (estimate if necessary)	6	6615
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	20,531,166.	21,834,685.
	9	Program service revenue (Part VIII, line 2g)	463,572.	459,473.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	705,796.	1,880,392.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<82,237.>	<12,848.>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,618,297.	24,161,702.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,795,794.	12,933,110.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,146,763.	4,857,878.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,620,672.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,654,709.	2,742,930.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	22,597,266.	20,533,918.
	19	Revenue less expenses. Subtract line 18 from line 12	<978,969.>	3,627,784.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	34,472,491.	35,386,634.
	21	Total liabilities (Part X, line 26)	8,801,596.	7,028,942.
	22	Net assets or fund balances. Subtract line 21 from line 20	25,670,895.	28,357,692.

RECEIVED
JAN 10 2018
OGDEN, UT
221
IRS-OSC

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

▶ Suzanne McCormick — Signature of officer — Date 1/3/18

▶ SUZANNE MCCORMICK, PRESIDENT & CEO — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
BETTY ISLER, CPA	Betty Isler CPA	12.20.17		P00541979

Firm's name ▶ CBIZ MHM, LLC — Firm's EIN ▶ 27-3605969

Firm's address ▶ 13577 FEATHER SOUND DRIVE, #400
CLEARWATER, FL 33762 — Phone no. (727)572-1400

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

9-74

SCANNED FEB 21 2018

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
TO PROVIDE LEADERSHIP THAT IMPROVES LIVES AND CREATES LASTING COMMUNITY CHANGE BY MOBILIZING THE CARING PEOPLE OF OUR COMMUNITIES TO GIVE, ADVOCATE, AND VOLUNTEER. UNITED WAY SUNCOAST'S COMMUNITY IMPACT PRIORITIES ARE PRESENTED IN SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 4,386,142. including grants of $ 2,454,240.) (Revenue $ 232,633.)
SUPPORT SERVICES: A NETWORK OF SERVICES IS PROVIDED TO HELP INDIVIDUALS/FAMILIES MOVE PAST IMMEDIATE NEED TO FULLY PARTICIPATE IN UNITED WAY SUNCOAST'S PRIORITY AREAS OF EARLY LITERACY, YOUTH SUCCESS AND FINANCIAL STABILITY. PROGRAMS INCLUDE PHYSICAL AND MENTAL HEALTH SERVICES, NUTRITION AND FOOD ASSISTANCE, OLDER ADULT SERVICES, INFORMATION/REFERRAL SERVICES, AND SHELTER AND SAFETY INTERVENTIONS. (CONTINUED ON SCHEDULE O)

4b (Code) (Expenses $ 4,718,616. including grants of $ 4,312,120.) (Revenue $)
EARLY LITERACY: EARLY LITERACY IS CRITICALLY IMPORTANT TO ENSURING THAT CHILDREN ARE PREPARED FOR SCHOOL AND THAT THEY THRIVE IN THE EARLY YEARS OF THEIR EDUCATION, SETTING THE PATH FOR FUTURE SUCCESS. THE UNITED WAY SUNCOAST EARLY LEARNING INITIATIVE FOCUSES ON IMPROVING SCHOOL READINESS AND EARLY GRADE READING SKILLS FOR CHILDREN IN THE REGION. STRATEGIES INCLUDE IMPROVING THE QUALITY OF EARLY CARE AND EDUCATION, PROVIDING ACCESS TO BOOKS FOR CHILDREN, QUALITY OUT-OF-SCHOOL TIME OPPORTUNITIES THAT REINFORCE LEARNING, INCREASING PARENTAL INVOLVEMENT AND CONNECTION TO SCHOOLS, AND IMPROVING ABSENTEEISM AND TARDINESS IN TARGETED SCHOOLS AND NEIGHBORHOODS. (CONTINUED ON SCHEDULE O)

4c (Code) (Expenses $ 3,412,659. including grants of $ 2,362,121.) (Revenue $)
FINANCIAL STABILITY: TO ACHIEVE FINANCIAL STABILITY, FAMILIES MUST HAVE STABLE, ADEQUATE INCOME AS WELL AS STABLE, ADEQUATE FINANCIAL RESOURCES. STABLE, ADEQUATE INCOME IS DERIVED FROM A JOB PAYING FAMILY-SUSTAINING WAGES AND PUBLIC, EMPLOYER AND INFORMAL INCOME SUPPORTS AND SUBSIDIES. STABLE, ADEQUATE FINANCIAL RESOURCES INCLUDE SAVINGS AND ASSETS TO COVER UNEXPECTED EXPENSES, AFFORDABLE AND ACCESSIBLE GOODS AND SERVICES, AND SAFE, AFFORDABLE HOUSING. (CONTINUED ON SCHEDULE O)

4d Other program services (Describe in Schedule O.)
(Expenses $ 4,116,128. including grants of $ 3,804,629.) (Revenue $ 226,840.)

4e Total program service expenses ▶ 16,633,545.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

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

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

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? *If "Yes," complete Schedule I, Parts I and II*	21	X	
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? *If "Yes," complete Schedule I, Parts I and III*	22	X	
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? *If "Yes," complete Schedule J*	23	X	
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? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
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? *If "Yes," complete Schedule L, Part I*	25b		X
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? *If "Yes," complete Schedule L, Part II*	26		X
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? *If "Yes," complete Schedule L, Part III*	27		X
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? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
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? *If "Yes," complete Schedule L, Part IV*	28c	X	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
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? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
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? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	26			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	91			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	N/A	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders N/A	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? N/A			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 20			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ FL

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [ ] 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. ▶

MINDY FOREY, VP FINANCE & OPERATIONS - (813) 274-0900
5201 W KENNEDY BLVD, STE 600, TAMPA, FL 33609

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, and 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 line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ERIC BAILEY CHAIR	2.00	X						0.	0.	0.
(2) DAN VIGNE VICE CHAIR	2.00	X						0.	0.	0.
(3) KIMBERLY HOPPER SECRETARY	2.00	X						0.	0.	0.
(4) DAVID WALKER TREASURER	2.00	X						0.	0.	0.
(5) MARK FERNANDEZ IMMEDIATE PAST CHAIR	2.00	X						0.	0.	0.
(6) CHARLENE AUSTIN DIRECTOR	2.00	X						0.	0.	0.
(7) MIKE BRENNAN DIRECTOR	2.00	X						0.	0.	0.
(8) BRIAN DEMING DIRECTOR	2.00	X						0.	0.	0.
(9) RAE DOWLING DIRECTOR	2.00	X						0.	0.	0.
(10) BOB DUTKOWSKY DIRECTOR	2.00	X						0.	0.	0.
(11) ESTELLA GRAY DIRECTOR	2.00	X						0.	0.	0.
(12) MARTY LANAHAN DIRECTOR	2.00	X						0.	0.	0.
(13) ROB LANE DIRECTOR	2.00	X						0.	0.	0.
(14) BILL MERRILL DIRECTOR	2.00	X						0.	0.	0.
(15) PETE NORDEN DIRECTOR	2.00	X						0.	0.	0.
(16) DAVID PIZZO DIRECTOR	2.00	X						0.	0.	0.
(17) PAUL REILLY 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 line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) STUART ROGEL DIRECTOR	2.00	X						0.	0.	0.
(19) KAREN RUSHING DIRECTOR	2.00	X						0.	0.	0.
(20) ALEX SINK DIRECTOR	2.00	X						0.	0.	0.
(21) SUZANNE MCCORMICK PRESIDENT & CEO	45.00			X				230,965.	0.	27,080.
(22) CARRIE ZEISSE CHIEF OPERATING OFFICER	45.00			X				144,494.	0.	12,447.
(23) EMERY IVERY TAMPA AREA PRESIDENT	45.00			X				140,603.	0.	7,672.
(24) MIREYA EAVEY SARASOTA AREA PRESIDENT	45.00			X				126,278.	0.	9,153.
(25) DEANNE WILLSEY CHIEF MARKETING OFFICER	45.00			X				123,938.	0.	16,183.
(26) JAMIE RENEE CHIEF DEVELOPMENT OFFICER	45.00			X				118,582.	0.	11,663.
1b Sub-total ▶								884,860.	0.	84,198.
c Total from continuation sheets to Part VII, Section A ▶								83,449.	0.	18,042.
d Total (add lines 1b and 1c) ▶								968,309.	0.	102,240.

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 ▶ 6

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

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
WINSIGHTZ, LLC, 13027 TERRACE BROOK PLACE, TEMPLE TERRACE, FL 33637	IT CONSULTING SERVICES	124,250.
UPIC SOLUTIONS, INC., 334 BEECHWOOD RD, SUITE 403, FORT MITCHELL, KY 41017	IT DATA HOSTING & SUPPORT SERVICES	105,848.

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 ▶ 2

SEE PART VII, SECTION A CONTINUATION SHEETS

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 line)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(27) MINDY FOREY VP, FINANCE & OPERATIONS	45.00			X				83,449.	0.	18,042.
Total to Part VII, Section A, line 1c								83,449.		18,042.

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04-01-16

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	1 a Federated campaigns	1a	413,844.				
	b Membership dues	1b					
	c Fundraising events	1c	72,800.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	138,519.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	21,209,522.				
	g Noncash contributions included in lines 1a-1f $ 647,783.						
	h **Total.** Add lines 1a-1f ▶			21,834,685.			
Program Service Revenue		Business Code					
	2 a FUNDRAISING FEES	561110		232,633.	232,633.		
	b SERVICE FEES	561110		226,840.	226,840.		
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			459,473.			

		(i)	(ii)	(A) Total revenue	(B)	(C)	(D)
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			477,819.			477,819.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6 a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
	7 a Gross amount from sales of assets other than inventory	(i) Securities 10,644,919.	(ii) Other 29,701.				
	b Less: cost or other basis and sales expenses	9,256,967.	15,080.				
	c Gain or (loss)	1,387,952.	14,621.				
	d Net gain or (loss) ▶			1,402,573.			1,402,573.
	8 a Gross income from fundraising events (not including $ 72,800. of contributions reported on line 1c) See Part IV, line 18	a	159,952.				
	b Less direct expenses	b	176,477.				
	c Net income or (loss) from fundraising events ▶			<16,525.>			<16,525.>
	9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a 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				
	11 a						
	b						
	c						
	d All other revenue		624190	3,677.			3,677.
	e **Total.** Add lines 11a-11d ▶			3,677.			
	12 **Total revenue.** See instructions. ▶			24,161,702.	459,473.	0.	1,867,544.

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	12,881,216.	12,881,216.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	51,894.	51,894.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,139,974.	559,311.	363,438.	217,225.
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	2,891,386.	1,469,922.	678,012.	743,452.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	134,717.	32,671.	86,046.	16,000.
9 Other employee benefits	311,703.	182,714.	53,444.	75,545.
10 Payroll taxes	380,098.	194,012.	86,658.	99,428.
11 Fees for services (non-employees)				
a Management				
b Legal	59,950.	3,524.	56,426.	
c Accounting	54,391.	26,307.	16,977.	11,107.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	119,480.		119,480.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	122,262.	66,808.	37,321.	18,133.
12 Advertising and promotion	319,118.	47,834.	261,349.	9,935.
13 Office expenses	380,578.	222,620.	91,869.	66,089.
14 Information technology	316,967.	169,224.	82,785.	64,958.
15 Royalties				
16 Occupancy	601,276.	305,343.	149,033.	146,900.
17 Travel	84,948.	49,693.	14,088.	21,167.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	142,973.	68,622.	48,312.	26,039.
20 Interest	8,436.	1,397.	6,401.	638.
21 Payments to affiliates	239,910.	113,370.	67,333.	59,207.
22 Depreciation, depletion, and amortization	248,085.	170,792.	38,714.	38,579.
23 Insurance	26,628.	15,883.	5,083.	5,662.
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				
b				
c				
d				
e All other expenses	17,928.	388.	16,932.	608.
25 **Total functional expenses.** Add lines 1 through 24e	20,533,918.	16,633,545.	2,279,701.	1,620,672.
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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		2,079,511.	1	3,696,125.
	2	Savings and temporary cash investments		99,032.	2	128,874.
	3	Pledges and grants receivable, net		6,644,852.	3	6,710,336.
	4	Accounts receivable, net		93,746.	4	151,948.
	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 instr) Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		50,200.	9	83,273.
	10a	Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D	10a 1,943,994.			
	b	Less accumulated depreciation	10b 1,376,423.	699,281.	10c	567,571.
	11	Investments - publicly traded securities		23,585,813.	11	22,695,119.
	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		1,220,056.	15	1,353,388.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		34,472,491.	16	35,386,634.
Liabilities	17	Accounts payable and accrued expenses		733,432.	17	808,579.
	18	Grants payable		6,406,897.	18	5,337,403.
	19	Deferred revenue		260,879.	19	307,147.
	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			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		1,400,388.	25	575,813.
	26	**Total liabilities.** Add lines 17 through 25		8,801,596.	26	7,028,942.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		16,415,528.	27	17,545,607.
	28	Temporarily restricted net assets		5,211,515.	28	6,754,028.
	29	Permanently restricted net assets		4,043,852.	29	4,058,057.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		25,670,895.	33	28,357,692.
	34	Total liabilities and net assets/fund balances		34,472,491.	34	35,386,634.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	24,161,702.
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,533,918.
3	Revenue less expenses Subtract line 2 from line 1	3	3,627,784.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,670,895.
5	Net unrealized gains (losses) on investments	5	433,909.
6	Donated services and use of facilities	6	<12,078.>
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<1,362,818.>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	28,357,692.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 [ ] Cash [X] Accrual [ ] Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	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. [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
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	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No 1545-0047
2016
Open to Public Inspection

Name of the organization UNITED WAY SUNCOAST, INC.
Employer identification number 59-3725701

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

07

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 **section 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? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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 ")	25,702,542.	22,916,516.	22,715,388.	20,531,166.	21,834,685.	113,700,297.
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	25,702,542.	22,916,516.	22,715,388.	20,531,166.	21,834,685.	113,700,297.
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)						24,128,758.
6 **Public support.** Subtract line 5 from line 4						89,571,539.

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	25,702,542.	22,916,516.	22,715,388.	20,531,166.	21,834,685.	113,700,297.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	324,707.	398,357.	487,657.	504,800.	477,819.	2,193,340.
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)	6,076.	6,371.	1,277.	1,566.	3,677.	18,967.
11 **Total support.** Add lines 7 through 10						115,912,604.

12 Gross receipts from related activities, etc (see instructions) | 12 | 2,561,820.

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 | 77.28 %

15 Public support percentage from 2015 Schedule A, Part II, line 14 | 15 | 81.84 %

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** ▶ ☐

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 ▶ ☐

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 ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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 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?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	**11c**		

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? *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*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization*	**2**		

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)? *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)*	**1**		

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?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions).***

a ☐ The organization satisfied the Activities Test *Complete* ***line 2*** *below*

b ☐ The organization is the parent of each of its supported organizations *Complete* ***line 3*** *below*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions)*

			Yes	No
2	Activities Test ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard*	**3b**		

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

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

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

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

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

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- explain in Part VI) 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 For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI 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.)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2016

Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
UNITED WAY SUNCOAST, INC.	59-3725701

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ $ ______

3 Volunteer hours for political campaign activities ______

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ ______

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ ______

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ ______

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ ______

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ ______

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	56,435.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	4,500.	
c Total lobbying expenditures (add lines 1a and 1b)	60,935.	
d Other exempt purpose expenditures	20,472,983.	
e Total exempt purpose expenditures (add lines 1c and 1d)	20,533,918.	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000.	

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

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	
h Subtract line 1g from line 1a If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	14,000.	22,500.	2,940.	60,935.	100,375.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	14,000.	22,500.	2,940.	56,435.	95,875.

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

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

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

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

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

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

Part IV **Supplemental Information**

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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2016
Open to Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	359,418.	

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? [X] 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? [X] Yes [ ] No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- [ ] Preservation of land for public use (e g., recreation or education)
- [ ] Protection of natural habitat
- [ ] Preservation of open space
- [ ] Preservation of a 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.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X ▶ $ ______

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on 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	17,838,781.	17,926,272.	16,504,307.	14,435,762.	7,957,253.
b Contributions	40,726.	195,653.	1,559,065.	420,245.	5,460,447.
c Net investment earnings, gains, and losses	1,868,019.	109,006.	418,653.	2,010,005.	1,090,716.
d Grants or scholarships					
e Other expenditures for facilities and programs	451,400.	392,150.	555,753.	361,705.	72,654.
f Administrative expenses					
g End of year balance	19,296,126.	17,838,781.	17,926,272.	16,504,307.	14,435,762.

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

a Board designated or quasi-endowment ▶ 55.00 %

b Permanent endowment ▶ 21.03 %

c Temporarily restricted endowment ▶ 23.97 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" on line 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				
b Buildings				
c Leasehold improvements		956,107.	686,970.	269,137.
d Equipment		987,887.	689,453.	298,434.
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				567,571.

Schedule D (Form 990) 2016

632052 08-29-16

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. (Col. (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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	282,076.
(3) CAPITAL LEASE OBLIGATIONS	67,379.
(4) OBLIGATION UNDER REMAINDER TRUST	
(5) AGREEMENT	90,560.
(6) DEFERRED LEASE INCENTIVE	135,798.
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	575,813.

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 [X]

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	20,347,754.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	433,909.		
b	Donated services and use of facilities	2b	501.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	<1,232,977.>		
e	Add lines **2a** through **2d**			2e	<798,567.>
3	Subtract line **2e** from line **1**			3	21,146,321.
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	119,480.		
b	Other (Describe in Part XIII.)	4b	2,895,901.		
c	Add lines **4a** and **4b**			4c	3,015,381.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	24,161,702.

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	17,545,737.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a	12,579.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	12,579.
3	Subtract line **2e** from line **1**			3	17,533,158.
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	119,480.		
b	Other (Describe in Part XIII.)	4b	2,881,280.		
c	Add lines **4a** and **4b**			4c	3,000,760.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	20,533,918.

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.

PART V, LINE 4:

THE ENDOWMENT FUNDS WERE ESTABLISHED TO PROVIDE FUTURE SUPPORT FOR THE ORGANIZATION'S MISSION. THE ORGANIZATION'S INTERNALLY-CONTROLLED ENDOWMENT NET ASSETS ARE COMPRISED OF INVESTMENTS HELD IN VARIOUS DONOR ENDOWMENTS, INVESTMENTS HELD UNDER A DONOR ADVISED FUND, INVESTMENTS HELD UNDER A CHARITABLE REMAINDER UNITRUST AGREEMENT, AND FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER THE PROVISIONS OF THE FLORIDA STATUTES. THE INTERNAL REVENUE CODE PROVIDES

Part XIII Supplemental Information *(continued)*

FOR TAXATION OF UNRELATED BUSINESS INCOME UNDER CERTAIN CIRCUMSTANCES. THE ORGANIZATION REPORTS NO UNRELATED BUSINESS TAXABLE INCOME; HOWEVER, SUCH STATUS IS SUBJECT TO FINAL DETERMINATION UPON EXAMINATION OF THE RELATED INCOME TAX RETURNS BY THE APPROPRIATE TAXING AUTHORITIES. THE ORGANIZATION HAS ADOPTED THE PROVISIONS OF ASC 740 RELATING TO "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES" AND DOES NOT BELIEVE IT HAS ANY MATERIAL INCOME TAX EXPOSURE RELATING TO UNCERTAIN TAX POSITIONS. THE ORGANIZATION'S INCOME TAX FILINGS FOR THE YEAR ENDED JUNE 30, 2014 AND THEREAFTER REMAIN SUBJECT TO EXAMINATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN CSV OF LIFE INSURANCE	3,169.
PROVISION FOR UNCOLLECTIBLE PLEDGES	-1,236,146.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-1,232,977.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	2,881,280.
GAIN ON DISPOSAL OF PROPERTY AND EQUIPMENT	14,621.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	2,895,901.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	2,881,280.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

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

2 a 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 10 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? Yes	No	**(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
Total ▶						

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

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

		(a) Event #1 ART OF GIVING (event type)	(b) Event #2 OBSTACLE COURSE RACE (event type)	(c) Other events NONE (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	206,612.	26,140.		232,752.
	2 Less Contributions	72,800.			72,800.
	3 Gross income (line 1 minus line 2)	133,812.	26,140.		159,952.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes		1,531.		1,531.
	6 Rent/facility costs		5,584.		5,584.
	7 Food and beverages	76,411.			76,411.
	8 Entertainment	49,152.	725.		49,877.
	9 Other direct expenses	31,259.	11,815.		43,074.
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				176,477.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				<16,525.>

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ 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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990
▶ Information about Schedule I (Form 990) and its instructions is at www irs gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.
Employer identification number 59-3725701

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF TAMPA BAY 1307 N MACDILL AVE TAMPA, FL 33607	59-0624368	501(C)(3)	844,470.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
AMERICAN RED CROSS TAMPA BAY CHAPTER - 3310 W MAIN ST - TAMPA, FL 33607	53-0196605	501(C)(3)	466,755.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
BOYS & GIRLS CLUBS OF THE SUNCOAST 2300 TALL PINES DR STE 150 LARGO, FL 33771	59-1566799	501(C)(3)	372,116.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED CEREBRAL PALSY OF TAMPA BAY 2215 E HENRY AVE TAMPA, FL 33610	59-0714818	501(C)(3)	357,220.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CRISIS CENTER OF TAMPA BAY INC ONE CRISIS CENTER PLAZA TAMPA, FL 33613	59-1785265	501(C)(3)	333,241.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
BIG BROTHERS BIG SISTERS TAMPA BAY 711 S DALE MABRY HWY STE 300 TAMPA, FL 33609	59-2173085	501(C)(3)	316,806.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 130.

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

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2016)**

632101 11-01-16

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUNCOAST CENTER 4024 CENTRAL AVE ST. PETERSBURG, FL 33711	59-2092717	501(C)(3)	309,726.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
THE CENTRE FOR WOMEN, INC 305 S HYDE PARK AVE TAMPA, FL 33606	59-1787902	501(C)(3)	304,071.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609	59-1807551	501(C)(3)	273,171.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
DRUG ABUSE COMPREHENSIVE COORDINATING OFFICE (DACCO) - 4422 E COLUMBUS DR - TAMPA, FL 33605	59-1514993	501(C)(3)	264,031.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CATHOLIC CHARITIES DIOCESE OF ST PETERSBURG - 1213 16TH ST N - ST. PETERSBURG, FL 33705	59-0875805	501(C)(3)	247,862.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
BAY AREA LEGAL SERVICES,INC 1302 N 19TH ST SUITE 400 TAMPA, FL 33605	59-1171886	501(C)(3)	247,828.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PINELLAS COUNTY URBAN LEAGUE 333 31ST ST N ST. PETERSBURG, FL 33713	59 1665523	501(C)(3)	247,471.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
NEIGHBORLY CARE NETWORK 13945 EVERGREEN AVE CLEARWATER, FL 33762	59-1218100	501(C)(3)	245,193.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
YMCA OF GREATER ST. PETERSBURG 600 1ST AVE N STE 201 ST. PETERSBURG, FL 33701	59-0624468	501(C)(3)	243,296.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SPRING OF TAMPA BAY, INC PO BOX 5147 TAMPA, FL 33675	59-1777135	501(C)(3)	242,491.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CORPORATION TO DEVELOP COMMUNITIES OF TAMPA, INC - 1907 E HILLSBOROUGH AVE STE 100 - TAMPA, FL 33610	59-3150608	501(C)(3)	228,044.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PARC 3190 TYRONE BLVD N ST. PETERSBURG, FL 33710	59-0791038	501(C)(3)	210,451.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CHILDREN FIRST, INC. 1723 N ORANGE AVE SARASOTA, FL 34234	59-0968249	501(C)(3)	207,414.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
REDLANDS CHRISTIAN MIGRANT ASSOCIATION (RCMA) - 402 W MAIN ST - IMMOKALEE, FL 34142	59-1221966	501(C)(3)	202,015.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA METROPOLITAN AREA YMCA 110 E OAK AVE TAMPA, FL 33602	59-1742909	501(C)(3)	198,211.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GIRL SCOUTS WEST CENTRAL FLORIDA COUNCIL - 4610 EISENHOWER BLVD - TAMPA, FL 33634	59-0624454	501(C)(3)	196,749.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SALVATION ARMY - TAMPA AREA COMMAND - 1603 N FLORIDA AVE - TAMPA, FL 33602	58-0660607	501(C)(3)	184,499.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
FLORIDA CENTER FOR EARLY CHILDHOOD 4620 17TH ST SARASOTA, FL 34235	59-1947024	501(C)(3)	179,386.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
GREATER TAMPA BAY AREA COUNCIL, INC., BOY SCOUTS OF AMERICA - 13228 N CENTRAL AVE - TAMPA, FL 33612	59-0637815	501(C)(3)	178,256.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
MACDONALD TRAINING CENTER 5420 W CYPRESS ST TAMPA, FL 33607	59-0777827	501(C)(3)	178,092.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GIRLS INCORPORATED OF PINELLAS 7700 61ST ST N PINELLAS PARK, FL 33781	59-0970201	501(C)(3)	170,595.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HELPING HAND DAY NURSERY, INC. 10320 N 56TH ST SUITE 310 TAMPA, FL 33617	59-0724461	501(C)(3)	160,044.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
A BRIGHTER COMMUNITY, INC. 1613 MARION ST TAMPA, FL 33602	59-0624453	501(C)(3)	158,405.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SALVATION ARMY SARASOTA CORPS 1400 10TH ST SARASOTA, FL 34236	58-0660607	501(C)(3)	153,507.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA LIGHTHOUSE FOR THE BLIND 1106 W PLATT ST TAMPA, FL 33606	59-0637876	501(C)(3)	152,077.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
THE CHILDREN'S HOME INC. 10909 MEMORIAL HWY TAMPA, FL 33615	59-0696284	501(C)(3)	146,310.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
JEWISH FAMILY & CHILDREN'S SERVICE OF SARASOTA-MANATEE - 2688 FRUITVILLE RD - SARASOTA, FL 34237	59-2693318	501(C)(3)	145,220.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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COMMUNITY ACTION STOPS ABUSE, INC. (CASA) - 1011 1ST AVE N - ST. PETERSBURG, FL 33701	59-2114359	501(C)(3)	140,513.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
RELIGIOUS COMMUNITY SERVICES (RCS) 503 S MARTIN LUTHER KING JR AVE CLEARWATER, FL 33756	59-1309186	501(C)(3)	132,988.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HILLSBOROUGH COUNTY PUBLIC SCHOOLS 2306 N HOWARD AVE TAMPA, FL 33607	59-2883361	501(C)(3)	125,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ALPHA HOUSE OF TAMPA, INC. 201 S TAMPANIA AVE TAMPA, FL 33609	59-2655523	501(C)(3)	124,411.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
211 TAMPA BAY CARES, INC. 14155 58TH ST N STE 211 CLEARWATER, FL 33760	59-3355555	501(C)(3)	124,400.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
BROOKWOOD FLORIDA CENTRAL 901 SEVENTH AVE S ST. PETERSBURG, FL 33705	59-0624387	501(C)(3)	119,860.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HAPPY WORKERS LEARNING CENTER, INC 920 19TH ST S ST. PETERSBURG, FL 33712	27-4826221	501(C)(3)	118,831.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
YMCA OF THE SUNCOAST, INC. 2469 ENTERPRISE RD CLEARWATER, FL 33763	59-0810731	501(C)(3)	117,301.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PRESCHOOL EXPERIENCE, INC 1665 25TH AVE N ST. PETERSBURG, FL 33713	59-0641386	501(C)(3)	111,387.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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PERSONAL ENRICHMENT THROUGH MENTAL HEALTH SERVICES PEMHS - 11254 58TH ST N - PINELLAS PARK, FL 33782	59-3153549	501(C)(3)	104,875.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EARLY CHILDHOOD SCHOOL READINESS PROGRAM - SDHC MAIL RTE 8, 5701 E HILLSBOROUGH AVE STE 2301 - TAMPA, FL 33610	59-6000660	501(C)(3)	104,389.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
R'CLUB CHILD CARE, INC. 4140 49TH ST N ST. PETERSBURG, FL 33709	59-1704870	501(C)(3)	104,338.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GULF COAST COMMUNITY FOUNDATION 601 TAMIAMI TRAIL SOUTH VENICE, FL 34285	59-1052433	501(C)(3)	100,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SENIORS IN SERVICE OF TAMPA BAY, INC. - 1306 W SLIGH AVE - TAMPA, FL 33604	59-2422975	501(C)(3)	95,682.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SARASOTA FAMILY YMCA 1 S SCHOOL AVE STE 301 SARASOTA, FL 34237	59-1618413	501(C)(3)	95,268.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED WAY 211 OF MANASOTA, INC. POST OFFICE BOX 458 SARASOTA, FL 34230	20-0262358	501(C)(3)	91,610.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNIVERSITY AREA COMMUNITY DEVELOPMENT CORPORATION, INC. - 14013 N 22ND ST - TAMPA, FL 33613	31-1624121	501(C)(3)	82,907.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA JEWISH FAMILY SERVICES 13009 COMMUNITY CAMPUS DR STE 114 TAMPA, FL 33625	59-1549670	501(C)(3)	75,879.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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UNITED FOOD BANK AND SERVICES 702 E ALSOBROOK ST SUITE H PLANT CITY, FL 33563	59-3069728	501(C)(3)	73,477.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
YWCA OF TAMPA BAY 100 2ND AVE N STE 130 ST. PETERSBURG, FL 33701	59-0638517	501(C)(3)	71,291.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CHILDREN'S HOME SOCIETY OF FLORIDA GULF COAST DIVISION - 1515 MICHELIN CT - LUTZ, FL 33549	59-0192430	501(C)(3)	66,472.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EASTER SEALS FLORIDA INC 2401 E HENRY AVE TAMPA, FL 33610	59-0637848	501(C)(3)	52,912.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
DEVEREUX FOUNDATION, INC. 5850 T. G. LEE BLVD., SUITE 400 ORLANDO, FL 32822	23-1390618	501(C)(3)	52,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ST. PETERSBURG COLLEGE FOUNDATION, INC. - 6605 5TH AVENUE N. - ST. PETERSBURG, FL 33733	59-1954362	501(C)(3)	51,350.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SAFE PLACE & RAPE CRISIS CENTER OF SARASOTA, INC. - 2139 MAIN ST - SARASOTA, FL 34237	59-1943399	501(C)(3)	50,639.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
JACKSON IN ACTION 83 FOUNDATION 3225 S. MACDILL AVE. TAMPA, FL 33629	46-0652996	501(C)(3)	50,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HISPANIC SERVICES COUNCIL 2902 N ARMENIA AVE STE 201 TAMPA, FL 33607	59-3198934	501(C)(3)	48,341.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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LUTHERAN SERVICES OF FLORIDA TAMPA - 3627A W. WATERS AVE. - TAMPA, FL 33614	59-2198911	501(C)(3)	47,622.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA CROSSROADS 5109 N NEBRASKA AVE TAMPA, FL 33603	59-1743719	501(C)(3)	45,399.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA BAY PARTNERSHIP REGIONAL RESEARCH & EDUCATION FDN - 4300 W. CYPRESS STREET, SUITE 700 - TAMPA, FL 33607	59-3414776	501(C)(3)	45,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
NONPROFIT LEADERSHIP CENTER OF TAMPA BAY - 1401 N. WESTSHORE BLVD, SUITE 101 - TAMPA, FL 33607	59-3671047	501(C)(3)	42,517.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
DAYSTAR LIFE CENTER 226 6TH ST. S. ST. PETERSBURG, FL 33701	65-0523539	501(C)(3)	41,651.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ALLIANCE FOR PUBLIC SCHOOLS 5810 FALCONCREEK PL LITHIA, FL 33547	45-5598673	501(C)(3)	41,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HILLSBOROUGH COUNTY FIREFIGHTER CHARITIES, INC. - 104 W COUNTRY CLUB DR - TAMPA, FL 33612	03-0390529	501(C)(3)	40,679.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
BIG BROTHERS BIG SISTERS - SUN COAST/SARASOTA - 1000 S. TAMIAMI TRAIL, SUITE C - VENICE, FL 34285	59-1361826	501(C)(3)	40,134.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CHILD PROTECTION CENTER 720 S ORANGE AVE SARASOTA, FL 34236	59-2113850	501(C)(3)	39,147.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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BOYS & GIRLS CLUBS OF SARASOTA COUNTY - 3100 FRUITVILLE ROAD - SARASOTA, FL 34237	59-6211876	501(C)(3)	37,821.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ARTZ 4 LIFE 1751 KINGS HWY CLEARWATER, FL 33755	59-3483799	501(C)(3)	36,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED METHODIST COOPERATIVE MINISTRIES / SUNCOAST, INC - 403 1ST AVE SW., SUITE 102 - LARGO, FL 33770	59-1623437	501(C)(3)	35,665.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GULF COAST JEWISH FAMILY AND COMMUNITY SERVICES - 14041 ICOT BOULEVARD - CLEARWATER, FL 33760	59-1229354	501(C)(3)	35,452.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SENIOR FRIENDSHIP CENTERS SARASOTA 1888 BROTHER GEENEN WAY SARASOTA, FL 34236	59-1522614	501(C)(3)	34,883.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SALVATION ARMY ST. PETERSBURG 340 14TH AVE. S. ST PETERSBURG, FL 33701	58-0660607	501(C)(3)	34,147.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
AMERICAN CANCER SOCIETY TAMPA 2006 W KENNEDY BLVD TAMPA, FL 33606	13-1788491	501(C)(3)	33,875.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HILLSBOROUGH FIREFIGHTERS BENEVOLENT RELIEF FUND - 5843 LAKEFRONT DR - WESLEY CHAPEL, FL 33545	27-1296803	501(C)(3)	33,665.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
10276 AMERICAN RED CROSS SW FLORIDA CHAPTER SARASOTA - 2001 CANTU CT - SARASOTA, FL 34232	53-0196605	501(C)(3)	33,299.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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CLEARPOINT CONSUMER CREDIT COUNSELING (CREDABILITY) - 4100 W KENNEDY BLVD SUITE 130 - TAMPA, FL 33609	58-0942924	501(C)(3)	31,990.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA, INC - 736 CENTRAL AVE - SARASOTA, FL 34236	59-1274328	501(C)(3)	31,468.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PINELLAS OPPORTUNITY COUNCIL, INC. FIFTH FL STE 157, 501 1ST AVE N ST. PETERSBURG, FL 33701	59-1227051	501(C)(3)	30,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNIDOS NOW 1750 17TH STREET, BUILDING D SARASOTA, FL 34234	27-4102169	501(C)(3)	29,850.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PACE CENTER FOR GIRLS HILLSBOROUGH - ONE WEST ADAMS STREET - JACKSONVILLE, FL 32202	59-2414492	501(C)(3)	25,160.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HILLSBOROUGH COMMUNITY COLLEGE FOUNDATION ELM - 1602 N. 15TH STREET, SUITE 248 - TAMPA, FL 33605	59-1810717	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PINELLAS COUNTY SCHOOLS PO BOX 2942 LARGO, FL 33779-2942	59-6000799	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA HILLSBOROUGH ECONOMIC DEVELOPMENT CORP - 101 E. KENNEDY BLVD., SUITE 1750 - TAMPA, FL 33602	27-1010441	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
MENTAL HEALTH COMMUNITY CENTERS, INC. - 240 B S TUTTLE AVE - SARASOTA, FL 34237	65-0238526	501(C)(3)	24,639.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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TAMPA POLICE MEMORIAL FUND COMMITTEE, INC. - 411 NORTH FRANKLIN STREET - TAMPA, FL 33602	59-3397263	501(C)(3)	22,475.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EARLY LEARNING COALITION OF SARASOTA COUNTY, INC. - 1750 17TH ST BLDG L - SARASOTA, FL 34234	65-1110174	501(C)(3)	22,145.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GIRL SCOUTS OF GULF COAST FLORIDA, INC. - 4780 CATTLEMEN RD - SARASOTA, FL 34233	59-0760212	501(C)(3)	21,625.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
RISE TAMPA 411 N FRANKLIN ST TAMPA, FL 33602	46-5291016	501(C)(3)	17,887.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED WAY OF THE MID-SOUTH 1005 TILLMAN STREET MEMPHIS, TN 38112	56-1010742	501(C)(3)	17,600.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EMBRACING LEGACY 5201 N ARMENIA AVE TAMPA, FL 33603	45-3354344	501(C)(3)	17,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
POLICE ATHLETIC LEAGUE OF PINELLAS COUNTY - 3755 46TH AVE N - ST. PETERSBURG, FL 33714	59-3760782	501(C)(3)	15,820.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA POLICE ATHLETIC LEAGUE 1924 W. DIANA STREET TAMPA, FL 33604-5816	23-7079352	501(C)(3)	15,509.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EASTER SEALS SOUTHWEST FLORIDA, INC. - 350 BRADEN AVE. - SARASOTA, FL 34243	59-0638490	501(C)(3)	14,850.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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THE ARC TAMPA BAY, INC 1501 N BELCHER RD STE 249 CLEARWATER, FL 33765	59-1056551	501(C)(3)	14,472.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA BAY SPORTS COMMISSION 401 E. JACKLSON ST., SUITE 2100 TAMPA, FL 33602	59-3468367	501(C)(3)	12,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA FIREFIGHTERS CHARITY FUND, INC - 3116 N BOULEVARD - TAMPA, FL 33603	55-0842602	501(C)(3)	11,350.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNIVERSITY OF SOUTH FLORIDA SARASOTA / MANATEE - 8350 N TAMIAMI TRAIL - SARASOTA, FL 34243	59-3102112	501(C)(3)	11,200.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
STARTING RIGHT NOW 16057 TAMPA PALMS BLVD STE 231 TAMPA, FL 33647	26-3725699	501(C)(3)	10,120.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
INITIATIVE FOR A COMPETITIVE INNER CITY INC - 56 WARREN STREET, SUITE 300 - ROXBURY, MA 02119	13-3772904	501(C)(3)	10,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA BAY NETWORK TO END HUNGER 4532 W KENNEDY BLVD SUITE 252 TAMPA, FL 33609	36-4758155	501(C)(3)	10,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED WAY OF MANATEE COUNTY 1701 14TH ST W BRADENTON, FL 34205	59-0901509	501(C)(3)	9,619.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
LUTHERAN SERVICES OF FLORIDA - SARASOTA - 3625 W WATERS AVE - TAMPA, FL 33614	59-2198911	501(C)(3)	9,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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THE ARC OF WALKER COUNTY 745 RUSSELL DAIRY RD JASPER, AL 35503	63-0760044	501(C)(3)	8,800.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED WAY OF BROWARD COUNTY 1300 S. ANDREWS AVE. FT. LAUDERDALE, FL 33316-1838	59-0624402	501(C)(3)	8,760.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ST. PETERSBURG FREE CLINIC 863 3RD AVE N ST. PETERSBURG, FL 33701	23-7208280	501(C)(3)	8,362.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
HILLSBOROUGH COUNTY FIRE RESCUE FOUNDATION - 2709 E HANNA AVE - TAMPA, FL 33610	46-3310942	501(C)(3)	7,885.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
PACE CENTER FOR GIRLS - PINELLAS 5540 PARK BLVD PINELLAS PARK, FL 33781	59-2414492	501(C)(3)	7,731.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
METROPOLITAN MINISTRIES 2002 N FLORIDA AVE TAMPA, FL 33602	59-1477007	501(C)(3)	7,576.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
WHEELS OF SUCCESS, INC. 5420 W CYPRESS ST TAMPA, FL 33607	56-2372792	501(C)(3)	7,552.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
THE SKILLS CENTER, INC 5470 E. BUSCH BLVD. #132 TAMPA, FL 33617	26-0631467	501(C)(3)	7,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
GIRLS EMPOWERED MENTALLY FOR SUCCESS, INC. - PO BOX 292814 - TAMPA, FL 33687	20-2375049	501(C)(3)	7,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
CLEARWATER NEIGHBORHOOD HOUSING SERVICES INC - 608 N. GARDEN ST. - CLEARWATER, FL 33755	59-1898542	501(C)(3)	7,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNIVERSITY OF SOUTH FLORIDA FOUNDATION - 4202 E FOWLER AVE STOP ALC100 - TAMPA, FL 33620	59-0879015	501(C)(3)	7,148.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
UNITED WAY OF PASCO COUNTY 17230 CAMELOT CT LAND O'LAKES, FL 34638	59-2193178	501(C)(3)	7,075.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
VAN GOGH'S PALETTE, INC. DBA VINCENT HOUSE - 4801 78TH AVE. N. - PINELLAS PARK, FL 33781	59-3720139	501(C)(3)	7,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ST. JOSEPH'S HOSPITAL FOUNDATION 3001 W. MARTIN L. KING BLVD. TAMPA, FL 33607	59-1100828	501(C)(3)	6,713.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
ENTERPRISING LATINAS, INC. 18238 US HWY 301 WIMAUMA, FL 33598	27-1247381	501(C)(3)	6,700.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CITY OF TAMPA BLACK HISTORY PO BOX 1782 TAMPA, FL 33601	45-0540281	501(C)(3)	6,695.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SUN COAST POLICE LAW ENFORCEMENT CHARITIES - 14141 46TH ST N STE 1205 - CLEARWATER, FL 33762	59-3581556	501(C)(3)	6,261.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
FRAMEWORKS OF TAMPA BAY 402 EAST OAK AVENUE TAMPA, FL 33602	20-8776228	501(C)(3)	6,116.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
TAMPA JCC/FEDERATION 13009 COMMUNITY CAMPUS DR TAMPA, FL 33625	23-7182057	501(C)(3)	5,708.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SUNRISE COMMUNITY OF POLK COUNTY 5115 WALLACE CT LAKELAND, FL 33813	65-0714062	501(C)(3)	5,351.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
TAMPA FIREFIGHTERS MUSEUM 720 ZACK STREET TAMPA, FL 33602	59-3467403	501(C)(3)	5,121.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
EMPATH CHOICES FOR CARE, INC. 5771 ROOSEVELT BLVD. CLEARWATER, FL 33760	31-1699259	501(C)(3)	5,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
CATHOLIC CHARITIES OF DESOTO COUNTY - 1000 PINEBROOK RD - VENICE, FL 34285	59-2473176	501(C)(3)	5,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
SPIRIT OF TRUTH MINISTRIES 2303 BANDY DR. SEFFNER, FL 33584	59-3666782	501(C)(3)	5,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING
JUNIOR ACHIEVEMENT OF TAMPA BAY 13707 N 22ND STREET TAMPA, FL 33613	59-1098499	501(C)(3)	15,335.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS & OTHER PROGRAM FUNDING

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INDIVIDUAL SAVINGS ACCOUNT (IDA) PROGRAM MATCHES	18	20,989.	0.	N/A	N/A
COLLEGE SCHOLARSHIPS OR TRAINING PROGRAM TUITION	10	20,490.	0.	N/A	N/A
HOUSING, UTILITY, FOOD, MEDICAL, OR OTHER DIRECT ASSISTANCE	56	10,415.	0.	N/A	N/A

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

PART I, LINE 2:

MONITORING POLICIES FOR ALLOCATED GRANT FUNDING:

ALL ORGANIZATIONS RECEIVING GRANT FUNDING HAVE PASSED AN INITIAL APPLICATION PROCESS THAT DEMANDS QUALIFICATION BASED ON QUALITY AND ACCOUNTABILITY FOR ALL ASPECTS OF THE ORGANIZATION (GOVERNANCE, FISCAL, PERSONNEL MANAGEMENT, AND PROGRAMS). ONCE ELIGIBLE, AGENCIES ARE INVITED TO APPLY ANNUALLY (OR ON A TIMELINE DETERMINED BY THE BOARD) FOR SUPPORT OF SPECIFIC PROGRAMS ADDRESSING CRITICAL COMMUNITY NEED. PROGRAM APPLICATIONS ARE REVIEWED BY TEAMS OF STAFF AND VOLUNTEERS IN THE INVESTMENT REVIEW

Part IV Supplemental Information

PROCESS. RECOMMENDATIONS FROM THESE TEAMS GO TO THE COMMUNITY AND PARTNERSHIP DEVELOPMENT COMMITTEE FOR APPROVAL BEFORE GOING TO THE BOARD FOR FINAL APPROVAL.

PROGRAM GRANT CRITERIA INCLUDES:

ALIGNMENT WITH UNITED WAY'S IMPACT AGENDA, PROGRAM PERFORMANCE, AND NEED OR AVAILABILITY OF FUNDS FROM OTHER SOURCES. QUALIFYING FOR FUNDING AS AN AGENCY DOES NOT GUARANTEE FUNDING FOR PROGRAM APPLICATIONS. GRANT PERFORMANCE IS REVIEWED EVERY 6 MONTHS OR AS DETERMINED NECESSARY BY STAFF AND VOLUNTEERS.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☒ Compensation committee ☒ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		X
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		X
b	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	5b		X
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		X
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III	6b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W 2 and/or 1099 MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i) (D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(1) SUZANNE MCCORMICK	(i)	206,996.	10,000.	13,969.	9,460.	17,620.	258,045.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CARRIE ZEISSE	(i)	140,702.	3,500.	292.	4,532.	7,915.	156,941.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

Part III | Supplemental Information

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

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open To Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefiting Interested Persons.

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

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
PAUL REILLY	BOARD MEMBER	71,832.	SEE PART V		X

Part V Supplemental Information

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

PART IV - BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

THE BOARD MEMBER IS THE CEO OF RAYMOND JAMES WHERE UNITED WAY SUNCOAST HAS SEVERAL BROKERAGE ACCOUNTS. THE MARKET BASIS OF THE INVESTMENTS AS OF JUNE 30, 2017 IS $13,558,157. THE AMOUNT OF THE TRANSACTION REPORTED IN COLUMN (C) ABOVE REPRESENTS INVESTMENT MANAGEMENT FEES PAID TO RAYMOND JAMES DURING THE YEAR.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

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2016

Open To Public Inspection

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	110	647,783.	STOCK QUOTE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If "Yes," describe in Part II			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

SCHEDULE M, LINE 32B:

UNITED WAY SUNCOAST UTILIZED AN AUCTIONEER AND ONLINE BIDDING SOFTWARE COMPANY TO ASSIST WITH THE SILENT AND LIVE AUCTION THAT OCCURS AT OUR ART OF GIVING EVENT.

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.

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Name of the organization	Employer identification number
UNITED WAY SUNCOAST, INC.	59-3725701

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNITED WAY SUNCOAST FIGHTS FOR THE EDUCATION AND FINANCIAL STABILITY OF EVERY PERSON IN OUR COMMUNITY. WE WORK TO GIVE CHILDREN THE SKILLS TO SUCCEED AND HELP ADULTS ACHIEVE LONG-TERM FINANCIAL STABILITY SO THEY CAN SUPPORT THEMSELVES AND THEIR FAMILIES. THIS WORK IS ACCOMPLISHED BY FOCUSING ON THE FOLLOWING COMMUNITY IMPACT PRIORITIES PRESENTED BELOW.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

HEALTHCARE NAVIGATION

UNITED WAY WORKS WITH CLIENTS THROUGHOUT THE COMMUNITY TO ENSURE THAT THEY HAVE ACCESS TO HEALTHCARE INSURANCE AND CAN NAVIGATE THE HEALTHCARE ENVIRONMENT. IN THE TAMPA AREA, 80 APPOINTMENTS WERE SCHEDULED BY THE NAVIGATOR AND 159 PEOPLE RECEIVED ASSISTANCE FROM THE HEALTHCARE NAVIGATOR.

MISSION UNITED

UNITED WAY HAS STARTED A NEW INITIATIVE TO TARGET NEW VETERANS IN THE COMMUNITY WHO ARE EXITING THE MILITARY. THE PROGRAM TARGETS THESE INDIVIDUAL AND HOPES TO EDUCATE NEW VETERANS ON THE AVAILABILITY OF JOBS, RECRUITING TRANSITIONING VETERANS TO BEING EMPLOYED LOCALLY, INCREASING CONNECTIVITY WITH VSO, THE MILITARY, AND NONPROFITS, AND CONNECTING VETERANS AND THEIR FAMILIES TO THEIR COMMUNITY TO CHANGE THE NARRATIVE OF VETERANS IN TAMPA BAY AREA.

VOLUNTEER SUPPORT

VOLUNTEERS SUPPORT MUCH OF THE WORK THAT IS DONE BOTH INTERNALLY AT

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

UNITED WAY AS WELL AS EXTERNALLY THROUGH OUR VARIOUS PROGRAMS AND PARTNERS. THROUGH OUR VOLUNTEER RECRUITMENT AND SUPPORT THROUGH THE UNITED WAY HANDSON SUNCOAST PLATFORM, 44,723 HOURS WERE ORGANIZED ACROSS 122 DIFFERENT ORGANIZATIONS. THIS WORK TRANSLATES TO $1,053,686 OF VOLUNTEER SUPPORT DELIVERED BACK INTO OUR COMMUNITY IN LAST YEAR ALONE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
3,783 CHILDREN IN NEED HAD ACCESS TO EDUCATIONAL PROGRAMMING OVER THE SUMMER SO THEY WERE BETTER PREPARED WHEN THEY RETURNED TO SCHOOL AND 158,373 LOCAL CHILDREN HAD ACCESS TO EDUCATION AND SUPPORT PROGRAMS. IN ADDITION TO AGENCY-BASED PROGRAMS, UNITED WAY SUNCOAST DIRECTLY MANAGES SPECIFIC PROGRAMS FOCUSED ON EARLY LEARNING TO HELP CHILDREN IN THE SUNCOAST REGION SUCCEED:

SUMMER CARE
IN ORDER TO PREVENT LEARNING LOSS OVER THE SUMMER, UNITED WAY SUNCOAST FUNDS OVER HALF A MILLION DOLLAR IN SCHOLARSHIPS FOR LOW-INCOME CHILDREN TO ATTEND A FREE, FULL-TIME, HIGH-QUALITY SUMMER PROGRAMS. ADULT FAMILY MEMBERS OF CHILDREN RECEIVING SCHOLARSHIPS ATTEND EDUCATIONAL WORKSHOPS TO HELP BUILD MORE FINANCIALLY SECURE HOUSEHOLDS. ALL CHILDREN AT THE SUMMER CARE SITES RECEIVE A SUMMER BRIDGE BOOK AND SPEND A MINIMUM OF 30 MINUTES WORKING ON THE CURRICULUM DAILY, WITH SOME STRUGGLING READERS GETTING ADDITIONAL TUTORING SUPPORT. DURING THE SUMMER OF 2017, 666 CHILDREN RECEIVED SCHOLARSHIPS AND 392 CHILDREN WERE REPRESENTED BY PARENTS WHO ATTENDED A FINANCIAL EDUCATION COURSE. 2,892 CHILDREN USED THE SUMMER BRIDGE BOOKS AND 254 RECEIVED INDIVIDUAL TUTORING TO HELP IMPROVE THEIR READING SKILLS.

Name of the organization: UNITED WAY SUNCOAST, INC.

Employer identification number: 59-3725701

READINGPALS

READINGPALS IS AN ACADEMIC MENTORING AND TUTORING PROGRAM FOR CHILDREN IN GRADES K-3. THE PROGRAM FOCUSES ON HELPING STRUGGLING READERS EXCEL, TO FOSTER AN APPRECIATION FOR READING IN CHILDREN, AND TO BUILD LITERACY SKILLS. THROUGH READINGPALS, VOLUNTEER READING TUTORS DIRECTLY IMPACT CHILDREN'S ACADEMIC SUCCESS BY SPENDING ONE HOUR EACH WEEK WORKING WITH STUDENTS WHO NEED HELP THE MOST, MAKING SURE THEY HAVE THE BEST CHANCE FOR SUCCESS. IN 2016-2017, 115 VOLUNTEERS SERVED 170 CHILDREN WITH AT LEAST THREE HOURS OF READING (THOUGH MANY DID MORE) AND GAVE THEM 1,478 BOOKS.

WALKING SCHOOL BUS

THE WALKING SCHOOL BUS HELPS STUDENTS AT CAMPBELL PARK ELEMENTARY IN SOUTH SAINT PETERSBURG ARRIVE AT SCHOOL SAFELY AND ON-TIME EACH DAY. TARDINESS AND ABSENTEEISM HAVE DROPPED SINCE THE PROGRAM BEGAN, WITH CHILDREN ARRIVING ON-TIME TO HAVE A WELL-BALANCED BREAKFAST BEFORE CLASS, ENSURING THAT THEY ARE ALERT AND READY TO LEARN FROM THE MOMENT THEY STEP INTO THE CLASSROOM. IN 2016-2017, PARENTS AND VOLUNTEERS ACCOMPANIED 183 STUDENTS ON THEIR WALK TO SCHOOL DURING THE SCHOOL YEAR AND SUMMER.

MYON

THE MYON PARTNERSHIP PROVIDES ALL CHILDREN FROM BIRTH THROUGH EIGHTH GRADE IN HILLSBOROUGH COUNTY WITH ACCESS TO MORE THAN 10,000 E-BOOKS. THE GOAL OF THE MYON PARTNERSHIP IS TO PROVIDE EACH CHILD IN OUR COMMUNITY WITH EQUITABLE ACCESS TO THE LARGEST COLLECTION OF ENHANCED DIGITAL BOOKS TO ENCOURAGE READING, INCREASE LITERACY RATES, AND

Name of the organization: UNITED WAY SUNCOAST, INC.
Employer identification number: 59-3725701

PROMOTE LITERACY THROUGHOUT THE REGION.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
UNITED WAY SUNCOAST FINANCIAL STABILITY STRATEGIES INCLUDE: INCREASE ENROLLMENT IN AND COMPLETION OF DEGREE, CERTIFICATION AND/OR TRAINING PROGRAMS; PROVIDE SUPPORTS TO HELP INDIVIDUALS RETAIN EMPLOYMENT AND ENHANCE THEIR CAREERS; INCREASE FINANCIAL KNOWLEDGE AND SKILLS; CONNECT LOW-INCOME WORKING FAMILIES WITH AFFORDABLE HOUSING; INCREASE AWARENESS OF AVAILABLE INCOME SUPPORTS THROUGH EDUCATION AND OUTREACH EFFORTS; AND IMPROVE PRODUCTS AND SYSTEMS THAT ENABLE LOW-INCOME WORKING FAMILIES TO SAVE.

2,166 ADULTS RECEIVED PRE-EMPLOYMENT SERVICES INCLUDING GED PREPARATION, TECHNICAL CERTIFICATIONS, ETC. TO HELP THEM SECURE EMPLOYMENT WITH FAMILY SUSTAINING WAGES AND 5,081 ADULTS RECEIVED FINANCIAL EDUCATION TO BECOME MORE FINANCIALLY SECURE. IN ADDITION TO AGENCY-BASED PROGRAMS, UNITED WAY SUNCOAST DIRECTLY MANAGES SPECIFIC PROGRAMS FOCUSED ON FINANCIAL STABILITY TO HELP FAMILIES IN THE SUNCOAST REGION SUCCEED:

FREE INCOME TAX PREPARATION/VOLUNTEER INCOME TAX ASSISTANCE
UNITED WAY SUNCOAST BELIEVES THAT NO LOW TO MODERATE INCOME HOUSEHOLDS SHOULD PAY SOMEONE TO FILE THEIR TAXES. EACH YEAR, WE HELP RESIDENTS WITH A HOUSEHOLD INCOME OF $64,000 OR LESS KEEP THEIR HARD EARNED MONEY BY OFFERING FREE INCOME TAX PREPARATION THROUGH THE VOLUNTEER INCOME TAX ASSISTANCE PROGRAM AND THE PROSPERITY CAMPAIGN. DURING THE 2016 TAX YEAR, 19,275 TAX RETURNS WERE PREPARED BY 416 TRAINED VOLUNTEERS THROUGH UNITED WAY'S PROSPERITY CAMPAIGN, A PARTNERSHIP BETWEEN UNITED

Name of the organization: UNITED WAY SUNCOAST, INC.
Employer identification number: 59-3725701

WAY, HILLSBOROUGH AARP, AND MACDILL AIR FORCE BASE'S AIRMAN AND FAMILY READINESS CENTER, RESULTING IN $24.5 MILLION IN REFUNDS TO THE COMMUNITY, WHICH HELPED PAY DEBT, SECURE SAFE HOUSING, AND MORE.

INDIVIDUAL DEVELOPMENT ACCOUNTS

UNITED WAY SUNCOAST'S INDIVIDUAL DEVELOPMENT ACCOUNT (IDA) IS A MATCHED SAVINGS ACCOUNT PROGRAM THAT HELPS LOW-INCOME INDIVIDUALS ACHIEVE THEIR GOALS OF BUYING A HOME, ATTENDING SCHOOL OR OPENING A BUSINESS. ELIGIBLE PARTICIPANTS ARE REQUIRED TO SAVE MONEY WHILE ALSO ACQUIRING CRITICAL FINANCIAL EDUCATION AND LONG-TERM MONEY MANAGEMENT SKILLS. FOR FY 2017, 7 INDIVIDUALS COMPLETED ACCOUNTS COMPRISING OF 5 SMALL BUSINESS ASSET PURCHASES AND 2 EDUCATION ASSET PURCHASES.

FINANCIAL COACHING

THE UNITED WAY SUNCOAST FINANCIAL COACHING PROGRAM TRAINS AND PARTNERS VOLUNTEERS WITH INDIVIDUALS WHO ARE READY TO TAKE CONTROL OF THEIR FINANCIAL SITUATION. IN THE 2017 FISCAL YEAR (JULY, 2016 - JUNE 2017), 42 INDIVIDUALS WERE MATCHED WITH A FINANCIAL COACH IN THE TAMPA AREA AND 71 CLIENTS WERE SERVED IN THE SARASOTA AREA FROM MAY, 2016 TO JUNE, 2017.

CAREEREDGE (MOVED OPERATIONS TO UNITED WAY SUNCOAST AS OF 1/2016)

CAREEREDGE IS DEDICATED TO HELPING AREA EMPLOYERS MEET THE CHALLENGES OF A FAST-CHANGING ECONOMY. ONE OF THE PRINCIPAL WAYS WE DO THAT IS BY FILLING THE WORKER "SKILL GAPS" THAT PREVENT LEADING EMPLOYERS FROM ACHIEVING STRONGER RATES OF REVENUE GROWTH. THE MISSION IS TO PROVIDE AN EXCEPTIONAL LABOR FORCE TO A REGION'S GROWING INDUSTRIES BY LEVERAGING COMMUNITY ASSETS AND FORMING HIGH-PERFORMING WORKFORCE

PARTNERSHIPS. IN 2016, 859 WORKERS WERE TRAINED AND 84 WERE PROMOTED. 402 RAISES WERE EARNED. 93 INTERNSHIPS WERE FUNDED, AND 916 CERTIFICATIONS/CREDENTIALS WERE EARNED BY PARTICIPANTS.

SULPHUR SPRINGS RESOURCE CENTER

THE SULPHUR SPRINGS RESOURCE CENTER (SSRC) FOCUSES ON WORKFORCE DEVELOPMENT AND ECONOMIC SUPPORTS FOR AREA RESIDENTS AND HAS BECOME PART OF THE FABRIC OF THE COMMUNITY IN THE AREA IT REPRESENTS. SINCE 2009, IN COOPERATION WITH COMMUNITY PARTNERS, UNITED WAY SUNCOAST PROVIDES PROGRAMS AND SERVICES AT THE SSRC TO HELP INDIVIDUALS ACHIEVE EDUCATIONAL, PROFESSIONAL AND FINANCIAL GOALS. IN 2016-2017, SSRC SERVED 2,476 PEOPLE IN THE AREAS OF LEGAL ASSISTANCE, FINANCIAL EDUCATION, GED INSTRUCTION, WORKFORCE DEVELOPMENT, ETC. SSRC SENT 136 INDIVIDUALS THROUGH WORKFORCE TRAININGS, ASSISTED OVER 200 INDIVIDUALS WITH WORKFORCE DEVELOPMENT AND SOFT SKILLS, AND PLACED OVER 100 INDIVIDUALS IN JOBS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DONOR DESIGNATED CONTRIBUTIONS: CONTRIBUTIONS TO UNITED WAY THAT DONORS DIRECT TO SPECIFIC 501(C)(3) AGENCIES.

EXPENSES $ 2,881,280. INCL GRANTS OF $ 2,881,280. REVENUE $ 226,840.

YOUTH SUCCESS: GRADUATING FROM HIGH SCHOOL ON-TIME IS AN ESSENTIAL BUILDING BLOCK FOR FUTURE SUCCESS. UNITED WAY SUNCOAST INVESTED OVER $830,000 IN ORDER TO SUPPORT OUR STRATEGIES OF INCREASING QUALITY OUT-OF-SCHOOL TIME EXPERIENCES THAT REINFORCE LEARNING, INCREASING PARENTAL INVOLVEMENT AND CONNECTION TO SCHOOLS, EXPOSING YOUTH TO LIFE AND WORKFORCE SKILLS, AND IMPROVING ABSENTEEISM AND TARDINESS IN

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TARGETED SCHOOLS AND NEIGHBORHOODS. IN 2016-2017, 158,373 LOCAL YOUTH HAD ACCESS TO EDUCATIONAL AND SUPPORT PROGRAMS IN OUR REGION. IN ADDITION TO AGENCY-BASED PROGRAMS, UNITED WAY SUNCOAST DIRECTLY MANAGES SPECIFIC PROGRAMS FOCUSED ON YOUTH SUCCESS TO HELP YOUTH IN THE SUNCOAST REGION SUCCEED:

OPERATION GRADUATE

OPERATION GRADUATE PROVIDES EDUCATIONAL OPPORTUNITIES AND A FOCUS ON LIFE SKILLS TO DEVELOP A FOUNDATION FOR TEENS TO BECOME SUCCESSFUL, CONTRIBUTING MEMBERS OF SOCIETY. THE PROGRAM TARGETS TEENS THAT HAVE BEEN IDENTIFIED AS AT-RISK OR NOT ACHIEVING THEIR FULL POTENTIAL. THIS INCLUDES HIGH SCHOOL STUDENTS WHO ARE IN THE "ACADEMIC MIDDLE" - NOT IN THE HIGHEST OR LOWEST QUARTER OF STUDENTS ACADEMICALLY; MIDDLE AND HIGH SCHOOL STUDENTS THAT ARE BEHIND IN THE NUMBER OF CREDITS NEEDED TO GRADUATE ON TIME; AND MIDDLE AND HIGH SCHOOL STUDENTS THAT WERE RECOMMENDED BY SCHOOL PERSONNEL OR COMMUNITY MEMBERS AS NEEDING SUPPORT AND ACADEMIC TUTORING AFTER SCHOOL TO IMPROVE GRADES. THE PROGRAM HAS THREE TRACKS: DUAL ENROLLMENT, CREDIT RECOVERY, AND TUTORING. IN 2016-2017, 100% OF DUAL ENROLLMENT STUDENTS COMPLETED THE PROGRAM AND SUCCESSFULLY GRADUATED ON TIME AND 90% WERE ACCEPTED INTO HIGHER EDUCATION OR THE MILITARY.

BOOKER MIDDLE SCHOOL

BOOKER MIDDLE SCHOOL (BMS) IS THE ONLY TITLE I MIDDLE SCHOOL IN SARASOTA COUNTY AND IS THE HOME OF UNITED WAY SUNCOAST'S FIRST PLACE-BASED INITIATIVE IN SARASOTA. THE BMS PROGRAM IS A TWO-GENERATION APPROACH FOCUSED ON CREATING LONG-LASTING COMMUNITY CHANGE IN NORTH SARASOTA. PROGRAM COMPONENTS INCLUDE A CENTER MANAGER WHO WILL

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COORDINATE RESOURCES FOR STUDENTS, PARENTS AND FAMILIES, A COMMUNITY LIAISON WORKING ON PARENTAL ENGAGEMENT, SUMMER PROGRAMS INTENDED TO PREVENT LEARNING LOSS, BRIDGES TO CAREERS - WORKING WITH PARENTS TO SUPPORT WORKFORCE READINESS AND A FINANCIAL STABILITY COMPONENT TO HELP CLIENTS BUILD THEIR FINANCIAL SECURITY.

FAFSA

COMPLETING THE FREE APPLICATION FOR STUDENT AID (FAFSA) IS THE FIRST STEP IN RECEIVING FEDERAL AID FOR POST-SECONDARY STUDIES. HOWEVER, EVERY YEAR MILLIONS OF THESE DOLLARS GO UNCLAIMED. IN ORDER TO ASSIST STUDENTS AND FAMILIES WITH THEIR ABILITY TO PAY FOR POST-SECONDARY EDUCATION, UNITED WAY SUNCOAST IS FOCUSED ON RECRUITING, TRAINING AND DEPLOYING "FAFSA ASSISTORS" AT FAFSA LABS IN THE HIGH SCHOOLS. IN SARASOTA IN 2016-2017, FAFSA COMPLETION INCREASED FROM 36.4 PERCENT TO 45.5 PERCENT AND IN HILLSBOROUGH, FAFSA COMPLETION INCREASED FROM 25.7 PERCENT TO 34.8 PERCENT.

EXPENSES $ 1,234,848.   INCLUDING GRANTS OF $ 923,349.   REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION HAS TWO CLASSES OF MEMBERS: THE MEMBERS OF THE SARASOTA AREA BOARD (SARASOTA MEMBERS) AND THE MEMBERS OF THE TAMPA BAY AREA BOARD (TAMPA BAY MEMBERS). EACH AREA BOARD SHALL CONSIST OF NOT LESS THAN 9 AND NOT MORE THAN 25 MEMBERS. THE PURPOSES OF EACH AREA BOARD ARE: (A) TO LEAD FUNDRAISING IN THE COUNTIES APPLICABLE TO SUCH AREA BOARD; (B) TO HAVE A SUBSTANTIAL ROLE WITH RESPECT TO THE ALLOCATION OF FUNDS RAISED WITH RESPECT TO SUCH COUNTIES TO AGENCIES AND INITIATIVES LOCATED IN SUCH COUNTIES; (C) TO APPOINT THE MEMBERS OF SUCH AREA BOARD; AND (D) TO APPOINT CERTAIN INDIVIDUALS TO THE BOARD OF DIRECTORS OF THE CORPORATION.

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EACH AREA BOARD SHALL MEET SEPARATELY NOT LESS THAN FOUR TIMES PER YEAR. ONE OF SUCH MEETINGS SHALL BE AN ANNUAL MEETING. AT EACH ANNUAL MEETING OF AN AREA BOARD, THE MEMBERS OF THE AREA BOARD SHALL ELECT A CHAIR, VICE CHAIR, AND SECRETARY.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH AREA BOARD SHALL SUBMIT TO THE BOARD OF DIRECTORS OF THE CORPORATION, NOT EARLIER THAN 90 DAYS, AND NOT LATER THAN 30 DAYS, BEFORE THE DATE OF EACH ANNUAL MEETING OF THE BOARD OF DIRECTORS, THE NAME OF ONE INDIVIDUAL WHOM SUCH AREA BOARD WISHES TO ELECT TO THE BOARD OF DIRECTORS OF THE CORPORATION AT SUCH ANNUAL MEETING. SUCH INDIVIDUAL SHALL BE DEEMED ELECTED TO THE BOARD OF DIRECTORS OF THE CORPORATION AT SUCH ANNUAL MEETING UNLESS SUCH ELECTION IS VETOED BY A VOTE OF NOT LESS THAN TWO-THIRDS OF THE ENTIRE BOARD OF DIRECTORS. WITHIN 10 DAYS AFTER ANY SUCH VETO, THE AREA BOARD WHOSE ELECTION WAS VETOED MAY SUBMIT TO THE BOARD OF DIRECTORS THE NAME OF ANOTHER INDIVIDUAL WHOM THE AREA BOARD PROPOSES TO ELECT TO THE BOARD OF DIRECTORS INSTEAD OF THE INDIVIDUAL WHO WAS VETOED, AND SUCH OTHER INDIVIDUAL WILL BECOME A MEMBER OF THE BOARD OF DIRECTORS UNLESS, AT OR BEFORE THE NEXT REGULARLY SCHEDULED MEETING OF THE BOARD OF DIRECTORS, SUCH OTHER INDIVIDUAL'S ELECTION IS VETOED BY THE VOTE OF NOT LESS THAN TWO-THIRDS OF THE ENTIRE BOARD OF DIRECTORS. ANY VETOES SHALL BE FINAL AND BINDING ON THE AREA BOARD AND EACH INDIVIDUAL WHO WAS VETOED.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS INITIALLY REVIEWED AND APPROVED BY AUDIT AND ETHICS COMMITTEE. A COPY IS THEN PROVIDED TO THE ORGANIZATION'S BOARD OF DIRECTORS FOR FINAL REVIEW AND COMMENT PRIOR TO FILING.

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FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY ALL BOARD MEMBERS AND STAFF ARE REQUIRED TO COMPLETE AND SUBMIT A SIGNED CONFLICT OF INTEREST FORM TO THE GOVERNANCE COMMITTEE. THE GOVERNANCE COMMITTEE REVIEWS ALL SUBMISSIONS AND, IF NECESSARY, FOLLOWS UP WITH ANY POSSIBLE CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS HAS APPOINTED AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE, CHAIRED BY A BOARD MEMBER AND INCLUDING BOARD AND NON-BOARD MEMBERS WITH VARYING EXPERTISE IN EXECUTIVE COMPENSATION MATTERS. A SCHEDULE OF ACTIVITIES IS CREATED AT THE BEGINNING OF THE YEAR OUTLINING THE COMMITTEE'S TIMELINE FOR ENSURING PERFORMANCE REVIEW, COMPENSATION DATA REVIEW, AND INDEPENDENT DECISION-MAKING ON RELATED ISSUES. THIS SCHEDULE IS PROVIDED TO THE BOARD FOR THEIR INFORMATION AND REGULAR REPORTS ARE MADE TO THE BOARD IN EXECUTIVE SESSION AS NEEDED.

THE BOARD CHAIR, WITH INPUT FROM THE MEMBERS OF THE EXECUTIVE COMMITTEE AND BOARD, CONDUCTS THE CEO PERFORMANCE REVIEW IN JULY OF EACH CALENDAR YEAR. THE RESULTS OF THE REVIEW ARE SHARED WITH THE CEO, DOCUMENTED FOR THE PERSONNEL FILE, AND REPORTED TO THE BOARD IN EXECUTIVE SESSION AT ITS NEXT REGULAR MEETING.

THE EXECUTIVE COMPENSATION COMMITTEE REGULARLY REVIEWS COMPENSATION COMPARABILITY DATA. AT LEAST EVERY THREE YEARS, THE COMMITTEE CONTRACTS WITH AN OUTSIDE, INDEPENDENT CONTRACTOR TO CONDUCT A THOROUGH COMPENSATION COMPARABILITY ANALYSIS (LAST DONE IN 2013). THE ANNUAL SALARY AND TOTAL COMPENSATION FOR THE CEO AND COO, ARE DETERMINED BY THE EXECUTIVE

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COMPENSATION COMMITTEE, REPORTED TO THE BOARD, AND DOCUMENTED IN BOARD MINUTES.

THE CEO PRESENTS THE RECOMMENDED SALARY AND TOTAL BENEFIT COMPENSATION FOR OTHER KEY EXECUTIVES ANNUALLY TO THE EXECUTIVE COMPENSATION COMMITTEE FOR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, ANNUAL REPORT, AND IRS FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE AS WELL AS UPON REQUEST. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN CSV OF LIFE INSURANCE	3,169.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-24,966.
PREVIOUSLY UNRECOGNIZED LOSSES EXCLUDED FROM NET PERIODIC PENSION COSTS	-104,875.
PROVISION FOR UNCOLLECTIBLE PLEDGES	-1,236,146.
TOTAL TO FORM 990, PART XI, LINE 9	-1,362,818.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S AUDIT & ETHICS COMMITTEE (THE COMMITTEE) IS RESPONSIBLE FOR ASSISTING THE BOARD OF DIRECTORS IN FULFILLING ITS OVERSIGHT RESPONSIBILITIES. AMONG THE RESPONSIBILITIES OF THE COMMITTEE IS THE OVERSIGHT OF THE INTEGRITY OF THE ORGANIZATION'S FINANCIAL ACCOUNTING PROCESSES AND SYSTEMS OF INTERNAL CONTROLS REGARDING FINANCE, ACCOUNTING AND USE OF ASSETS; THE INDEPENDENCE AND PERFORMANCE

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OF THE INDEPENDENT AUDITORS AND STAFF WITH FINANCE RESPONSIBILITIES; AND THE AUDITOR SELECTION PROCESS.

IN RELATION TO THE ANNUAL AUDIT, THE COMMITTEE:

-MEETS IN EXECUTIVE SESSION WITH THE INDEPENDENT AUDITORS

-OBTAINS A FORMAL STATEMENT FROM THE AUDITORS ANNUALLY REGARDING THEIR INDEPENDENCE

-OBTAINS A REPORT ANNUALLY REGARDING THE AUDITORS' QUALITY CONTROL PROCEDURES AND ANY REPORT ISSUED AS A RESULT OF A QUALITY CONTROL REVIEW OF THE AUDITORS

-OBTAINS AND REVIEWS ANY SIGNIFICANT CORRECTING AUDIT ADJUSTMENTS OR PASSED CORRECTING AUDIT ADJUSTMENTS

-REVIEWS THE DISPOSITION OF ANY MANAGEMENT LETTER COMMENTS, INTERNAL CONTROL AND/OR FRAUD RELATED MATTERS THAT ARISE DURING THE COURSE OF THE ANNUAL AUDIT

-PRE-APPROVES ALL NON-AUDIT SERVICES (OTHER THAN 990 AND 5500 PREPARATION)

-REVIEWS AND DISCUSSES WITH MANAGEMENT AND THE INDEPENDENT AUDITOR ALL CRITICAL ACCOUNTING POLICIES

-REQUIRES THE INDEPENDENT AUDITING FIRM TO ROTATE AUDIT MANAGER EVERY 3-5 YEARS

-REVIEWS ANNUALLY THE FORM 990 PRIOR TO FILING AND ENSURES THE CEO AND COO HAVE CERTIFIED THE CONTENTS OF THE FORM

-PROVIDES AN AVENUE OF COMMUNICATION AMONG THE ORGANIZATION'S INDEPENDENT AUDITORS, MANAGEMENT, STAFF, AND THE BOARD OF DIRECTORS

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at *www irs gov/form990*

OMB No 1545-0047
2016
Open to Public Inspection

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule R (Form 990) 2016**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end of year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
AN IRREVOCABLE TRUST C/O RAYMOND JAMES TRUST CO - 880 CARILLON PKW ST PETERSBURG, FL 33716	CHARITABLE REMAINDER UNITRUST	FL	N/A	TRUST	N/A	N/A	N/A		X
A FAMILY CHARITABLE REMAINDER TRUST C/O UNITED WAY SUNCOAST - 5201 W KENNEDY BLVD TAMPA, FL 33609	CHARITABLE REMAINDER UNITRUST	FL	N/A	TRUST	N/A	N/A	N/A		X

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

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

	(a) Name of related organization	(b) Transaction type (a s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec 501(c)(3) orgs? Yes	(e) No	(f) Share of total income	(g) Share of end of year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership