

UNITED WAY OF THE BAY AREA
PUBLIC DISCLOSURE COPY
RETURN OF EXEMPT ORGANIZATION
YEAR ENDED JUNE, 2016

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

2015
Open to Public Inspection

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

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

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED WAY OF THE BAY AREA		D Employer identification number 94-1312348
	Doing business as		E Telephone number 415-808-4300
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 36,385,892.
	550 KEARNY ST	1000	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94108		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: ANNE WILSON SAME AS C ABOVE			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.UWBA.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1922 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO BE THE CATALYST THAT ENABLES PEOPLE TO STRENGTHEN THEIR COMMUNITIES BY INVESTING IN ONE ANOTHER.
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 31
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 31
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 95
	6 Total number of volunteers (estimate if necessary) 6 7412
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 34,165,180. Prior Year 33,624,151. Current Year
	9 Program service revenue (Part VIII, line 2g) 266,648. 266,648. 437,484.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 518,424. 518,424. 139,751.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -108,547. -108,547. -90,986.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 34,841,705. 34,841,705. 34,110,400.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 22,601,491. 22,601,491. 21,706,299.
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 8,837,674. 8,837,674. 7,494,816.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) 2,393,270. 2,393,270. 2,393,270.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,022,586. 5,022,586. 4,927,808.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 36,461,751. 36,461,751. 34,128,923.	
19 Revenue less expenses. Subtract line 18 from line 12 -1,620,046. -1,620,046. -18,523.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 22,497,273. Beginning of Current Year 21,904,216. End of Year
	21 Total liabilities (Part X, line 26) 11,088,658. 11,088,658. 13,423,575.
	22 Net assets or fund balances. Subtract line 21 from line 20 11,408,615. 11,408,615. 8,480,641.

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	PUBLIC DISCLOSURE COPY		Date		
	Signature of officer JOAN CATHERINE BRAUN, CFAO		Date		
Paid Preparer Use Only	Print/Type preparer's name TRACY S. PAGLIA	Preparer's signature TRACY S. PAGLIA	Date 02/13/17	Check if self-employed <input type="checkbox"/>	PTIN P00366884
	Firm's name MOSS ADAMS LLP	Firm's address 101 SECOND STREET SUITE 900 SAN FRANCISCO, CA 94105	Firm's EIN 91-0189318	Phone no. 415-956-1500	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO BE THE CATALYST THAT ENABLES PEOPLE TO STRENGTHEN THEIR COMMUNITIES BY INVESTING IN ONE ANOTHER.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 18,533,963. including grants of \$ 18,533,963.) (Revenue \$ 437,484.) GROSS FUNDS AWARDED/ALLOCATED TO AGENCIES

4b (Code:) (Expenses \$ 4,614,973. including grants of \$ 2,730,854.) (Revenue \$ 0.) ECONOMIC SUCCESS: SPARKPOINT HAS SERVED MORE THAN 23,000 INDIVIDUALS SINCE LAUNCHING SPARKPOINT OAKLAND IN 2009, AND 5,504 PEOPLE IN THE LAST YEAR ALONE. MORE THAN 80% OF OUR CLIENTS ARE SEEING 5% OR BETTER PROGRESS ON THEIR INCOME, SAVINGS, CREDIT OR DEBT; AND MORE THAN 70% OF OUR CLIENTS ARE SEEING 30% OR MORE PROGRESS.

SPARKPOINT CENTERS OFFER AN ARRAY OF SERVICES IN ONE CONVENIENT LOCATION FOR A PERSON OR FAMILY TRYING TO MOVE OUT OF POVERTY, INCLUDING FINANCIAL COACHING ON BUDGETING AND SAVINGS, CREDIT AND DEBT MANAGEMENT, CAREER OR EDUCATION COUNSELING, SCREENING FOR PUBLIC BENEFITS, AND OTHERS. SPARKPOINT AIMS TO HAVE CLIENTS MOVE FROM POVERTY TO ECONOMIC SUCCESS BY (1) INCREASING INCOME; (2) REDUCING DEBT; (3)

4c (Code:) (Expenses \$ 1,500,216. including grants of \$ 278,000.) (Revenue \$ 0.) JOBS+ UNITED WAY'S JOBS+ PROGRAM HELPS PREPARE LOW-INCOME YOUTH AND YOUNG ADULTS (AGE 16-24) TO BECOME THE 21ST CENTURY WORKFORCE FOR EMPLOYERS IN SAN FRANCISCO AND ACROSS THE BAY AREA. CONNECTING BUSINESS, GOVERNMENT, SCHOOLS, NONPROFITS AND YOUTH, JOBS+ HELPS YOUNG PEOPLE GET JOB TRAINING AND WORK EXPERIENCE, PLAN CAREER PATHS, AND BECOME MOTIVATED TO FINISH HIGH SCHOOL AND GO ON TO COLLEGE OR POSTSECONDARY TRAINING. JOBS+ PRIMARY FOCUS IS YOUTH JOBS+, A PARTNERSHIP WITH SAN FRANCISCO MAYOR ED LEE, COMMUNITY PARTNERS AND EMPLOYERS. SINCE ITS INCEPTION AS SUMMER JOBS+ IN 2012, THE INITIATIVE HAS SERVED OVER 19,000 YOUTH IN SAN FRANCISCO AND LAST YEAR CONTINUED TO EXPAND SERVICES IN OAKLAND AND SAN MATEO COUNTIES. LAST YEAR, OVER 7,900 YOUTH WERE SERVE A PART OF THE MAYOR'S SUMMER JOB CHALLENGE IN

4d Other program services (Describe in Schedule O.) (Expenses \$ 3,373,028. including grants of \$ 163,482.) (Revenue \$ 0.)

4e Total program service expenses 28,022,180.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>	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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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	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

Main form table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 1041, and Form 720.

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

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 31		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 31		
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?		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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		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?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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		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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	X	
b	Other officers or key employees of the organization	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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 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.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **▶**
JOAN CATHERINE BRAUN - 415-808-4465
550 KEARNY ST, #1000, SAN FRANCISCO, CA 94108

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SUSAN SUTHERLAND IMMEDIATE PAST CHAIR	1.00	X		X				0.	0.	0.
(2) JEFFREY WOHL GENERAL COUNSEL/CHIEF ETHICS OFFICER	1.00	X		X				0.	0.	0.
(3) GWENDOLYN WONG DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(4) JAMES OLSON SECRETARY	5.00	X		X				0.	0.	0.
(5) LORETTA WALKER CHAIR OF THE BOARD	6.00	X		X				0.	0.	0.
(6) MARGARET BAKER CHAIR, AUDIT COMMITTEE	0.80	X						0.	0.	0.
(7) RONALD PEYTON DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(8) TIMOTHY PAULSON LABOR REPRESENTATIVE	0.50	X						0.	0.	0.
(9) WILLIAM WITHINGTON CHAIR, PUBLIC POLICY COMMITTEE	0.80	X						0.	0.	0.
(10) KIWOBA ALLAIRE DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(11) EDWARD BLAKEY DIRECTOR AT LARGE	0.10	X						0.	0.	0.
(12) CHARMAINE DETWEILER TREASURER	2.50	X		X				0.	0.	0.
(13) MICHAEL DILLON DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(14) ANTHONY EARLEY, JR. DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(15) LANCE FOX DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(16) PETER HULTMAN DIRECTOR AT LARGE	0.10	X						0.	0.	0.
(17) KEVIN JOHNSON DIRECTOR AT LARGE	0.10	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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MEREDITH KLAUSNER DIRECTOR AT LARGE	0.10	X					0.	0.	0.	
(19) JOE LAYMON DIRECTOR AT LARGE	0.30	X					0.	0.	0.	
(20) NOAH LICHTENSTEIN DIRECTOR AT LARGE	0.30	X					0.	0.	0.	
(21) ANNA MOK CHAIR, GOVERNANCE COMMITTEE	5.00	X					0.	0.	0.	
(22) TRENT ROHRER DIRECTOR AT LARGE	0.10	X					0.	0.	0.	
(23) RAUL RODRIGUEZ DIRECTOR AT LARGE	0.30	X					0.	0.	0.	
(24) MATT ROGERS DIRECTOR AT LARGE	1.00	X					0.	0.	0.	
(25) MICHAEL STEDMAN DIRECTOR AT LARGE	0.30	X					0.	0.	0.	
(26) SHERRY TENNYSON, ED.D. DIRECTOR AT LARGE	0.30	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							1,344,986.	0.	299,328.	
d Total (add lines 1b and 1c)							1,344,986.	0.	299,328.	

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 **10**

	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		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	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		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
INTERFACE CHILDREN'S SERVICES, 4001 MISSION OAKS BLVD, SUITE I, CAMARILLO, CA	CALL CENTER SERVICE	602,596.
LANEXPERT, 605 MARKET STREET, SUITE 410, SAN FRANCISCO, CA 94105	CONSULTING	125,567.
MOSS ADAMS LLP, 101 SECOND ST SUITE 900, SAN FRANCISCO, CA 94105	ACCOUNTING	115,683.

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 **3**

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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ROBERT THOMPSON DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(28) JULIA WILHELM DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(29) JOSH NEEDLES DIRECTOR AT LARGE	0.10	X						0.	0.	0.
(30) THOMAS LEIBOWITZ DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(31) PIERRE BREBER DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(32) RALPH EBERTS DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(33) JIM FOLEY DIRECTOR AT LARGE	0.10	X						0.	0.	0.
(34) AMY KO DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(35) MATTHEW LANG DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(36) LAWRENCE REMSTEDT DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(37) LAURIE WEINSTEIN DIRECTOR AT LARGE	0.10	X						0.	0.	0.
(38) ANNE WILSON CEO	55.00			X				304,936.	0.	85,623.
(39) ERIC MCDONNELL COO	55.00			X				250,922.	0.	44,163.
(40) JOAN BRAUN CHIEF FINANCIAL & ADMIN OFFICER	55.00			X				187,044.	0.	38,352.
(41) TRACEY HEATHER VP, DEVELOPMENT & INDIVIDUAL GIVING	37.50					X		109,608.	0.	16,315.
(42) TSE MING TAM VP, COMMUNITY INVESTMENT	37.50					X		120,708.	0.	31,948.
(43) JOHN SCHAUER VP, INFORMATION TECHNOLOGY	37.50					X		125,614.	0.	44,318.
(44) LIDIYA KUKOVIC VP, CONTROLLER	37.50					X		117,636.	0.	23,285.
(45) RANDY HYDE SR. VP, MARKETING	37.50					X		128,518.	0.	15,324.
Total to Part VII, Section A, line 1c								1,344,986.		299,328.

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					
	b Membership dues	1b					
	c Fundraising events	1c	403,584.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,311,548.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	31,909,019.				
	g Noncash contributions included in lines 1a-1f: \$		603,572.				
	h Total. Add lines 1a-1f		33,624,151.				
	Program Service Revenue	2 a PLEDGE PROCESSING FEES	Business Code 900099	331,834.	331,834.		
b CONSULTING FEE INCOME		900099	88,850.	88,850.			
c OFFICE SPACE RENTAL		900099	16,800.	16,800.			
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			437,484.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		252,516.			252,516.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	108,284.				
		(ii) Personal					
		b Less: rental expenses	0.				
		c Rental income or (loss)	108,284.				
	d Net rental income or (loss)		108,284.			108,284.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1,916,517.				
		(ii) Other	5,999.				
		b Less: cost or other basis and sales expenses	2,031,282.	3,999.			
		c Gain or (loss)	-114,765.	2,000.			
	d Net gain or (loss)		-112,765.			-112,765.	
	8 a Gross income from fundraising events (not including \$ 403,584. of contributions reported on line 1c). See Part IV, line 18	a	40,941.				
		b Less: direct expenses	240,211.				
c Net income or (loss) from fundraising events			-199,270.			-199,270.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	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						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			34,110,400.	437,484.	0.	48,765.	

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	21,706,299.	21,706,299.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,044,983.	273,457.	640,255.	131,271.
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	4,849,006.	2,451,797.	1,372,619.	1,024,590.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	184,090.	153,356.	-5,414.	36,148.
9 Other employee benefits	1,025,873.	544,488.	290,767.	190,618.
10 Payroll taxes	390,864.	197,693.	122,428.	70,743.
11 Fees for services (non-employees):				
a Management				
b Legal	1,200.		1,200.	
c Accounting	137,470.		137,470.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	53,059.		53,059.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,629,193.	1,278,536.	217,589.	133,068.
12 Advertising and promotion	198,127.	166,274.	11,304.	20,549.
13 Office expenses	557,531.	248,066.	188,990.	120,475.
14 Information technology				
15 Royalties				
16 Occupancy	1,187,021.	503,978.	391,535.	291,508.
17 Travel	113,253.	55,291.	35,914.	22,048.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	463,501.	155,048.	84,462.	223,991.
20 Interest				
21 Payments to affiliates	288,990.	126,780.	92,795.	69,415.
22 Depreciation, depletion, and amortization	289,650.	156,896.	75,221.	57,533.
23 Insurance				
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 _____	8,813.	4,221.	3,279.	1,313.
25 Total functional expenses. Add lines 1 through 24e	34,128,923.	28,022,180.	3,713,473.	2,393,270.
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	1,333,335.	1	848,161.
	2 Savings and temporary cash investments	115,654.	2	225,416.
	3 Pledges and grants receivable, net	8,930,961.	3	9,309,292.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see 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	74,722.	9	185,179.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,172,455.		
	b Less: accumulated depreciation	10b 1,492,292.	815,259.	10c 680,163.
	11 Investments - publicly traded securities	11,051,918.	11	10,549,957.
	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	175,424.	15	106,048.
16 Total assets. Add lines 1 through 15 (must equal line 34)	22,497,273.	16	21,904,216.	
Liabilities	17 Accounts payable and accrued expenses	4,880,404.	17	7,290,538.
	18 Grants payable	2,748,193.	18	2,693,376.
	19 Deferred revenue	706,129.	19	689,661.
	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	2,753,932.	23	2,750,000.
	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		25	
	26 Total liabilities. Add lines 17 through 25	11,088,658.	26	13,423,575.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,689,443.	27	867,124.
	28 Temporarily restricted net assets	2,826,797.	28	3,719,742.
	29 Permanently restricted net assets	3,892,375.	29	3,893,775.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	11,408,615.	33	8,480,641.	
34 Total liabilities and net assets/fund balances	22,497,273.	34	21,904,216.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,110,400.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,128,923.
3	Revenue less expenses. Subtract line 2 from line 1	3	-18,523.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,408,615.
5	Net unrealized gains (losses) on investments	5	-302,362.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,607,089.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,480,641.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Form 990 (2015)

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

2015

Open to Public Inspection

Name of the organization **UNITED WAY OF THE BAY AREA** Employer identification number **94-1312348**

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

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

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32748141.	38339472.	36845784.	34157980.	33624151.	175715528
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	32748141.	38339472.	36845784.	34157980.	33624151.	175715528
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)						12654831.
6 Public support. Subtract line 5 from line 4.						163060697

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	32748141.	38339472.	36845784.	34157980.	33624151.	175715528
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	454,635.	330,032.	266,236.	276,771.	360,800.	1688474.
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.)						
11 Total support. Add lines 7 through 10						177404002
12 Gross receipts from related activities, etc. (see instructions)					12	1,790,749.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	91.91 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	92.69 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2015

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

UNITED WAY OF THE BAY AREA

Employer identification number

94-1312348

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>3,450,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>1,315,529.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>892,019.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>944,248.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>702,527.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

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

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

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

Name of organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

(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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2015

LHA
532041
10-05-15

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)	9,599.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	7,229.													
c	Total lobbying expenditures (add lines 1a and 1b)	16,828.													
d	Other exempt purpose expenditures	34,112,095.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	34,128,923.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	48,361.	33,451.	42,087.	16,828.	140,727.
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	6,172.	10,792.	11,124.	9,599.	37,687.

Schedule C (Form 990 or 990-EZ) 2015

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

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

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

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

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

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

Part IV Supplemental Information

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

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

2015
Open to Public Inspection

Name of the organization **UNITED WAY OF THE BAY AREA** Employer identification number **94-1312348**

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	34	0
2 Aggregate value of contributions to (during year)	1,337,036.	0.
3 Aggregate value of grants from (during year)	1,468,405.	0.
4 Aggregate value at end of year	11,059.	0.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the 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	5,022,885.	5,254,646.	4,794,701.	4,345,472.	4,687,566.
b Contributions	1,400.	1,400.	1,000.	1,000.	
c Net investment earnings, gains, and losses	-150,974.	-12,314.	840,114.	164,963.	115,298.
d Grants or scholarships					
e Other expenditures for facilities and programs	199,384.	194,752.	360,534.	-283,266.	457,392.
f Administrative expenses	20,867.	26,095.	20,635.		
g End of year balance	4,653,060.	5,022,885.	5,254,646.	4,794,701.	4,345,472.

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 83.70 %
- c Temporarily restricted endowment 16.30 %

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		487,907.	201,302.	286,605.
d Equipment		664,247.	522,226.	142,021.
e Other		1,020,301.	768,764.	251,537.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				680,163.

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	15,087,586.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-302,362.	
	b Donated services and use of facilities	2b	1,157,117.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	240,211.	
	e Add lines 2a through 2d	2e	1,094,966.	
3	Subtract line 2e from line 1		3	13,992,620.
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	53,059.	
	b Other (Describe in Part XIII.)	4b	20,064,721.	
	c Add lines 4a and 4b	4c	20,117,780.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	34,110,400.

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	18,015,560.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	1,157,117.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	2,847,300.	
	e Add lines 2a through 2d	2e	4,004,417.	
3	Subtract line 2e from line 1		3	14,011,143.
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	53,059.	
	b Other (Describe in Part XIII.)	4b	20,064,721.	
	c Add lines 4a and 4b	4c	20,117,780.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	34,128,923.

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:

ENDOWMENTS ARE USED FOR PERMANENTLY OR TEMPORARILY AND UNRESTRICTED PURPOSES ACCORDING TO THE INTENT OF THE DONOR.

PART X, LINE 2:

UWBA IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND SECTION 23701D OF THE REVENUE AND TAXATION CODE EXCEPT TO THE EXTENT OF UNRELATED BUSINESS TAXABLE INCOME AS DEFINED UNDER IRC SECTIONS 511 THROUGH 515. SINCE UWBA HAS NO UNRELATED BUSINESS TAXABLE INCOME, NO PROVISION FOR INCOME TAXES HAS BEEN PROVIDED IN THESE FINANCIAL STATEMENTS. UWBA HAS NO UNRECOGNIZED TAX BENEFITS OR UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2016.

Part XIII Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES RECLASSIFIED FROM EXPENSES TO REVENUE 240,211.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED PLEDGES 20,064,721.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES RECLASSIFIED FROM EXPENSES TO REVENUE 240,211.

UNCOLLECTIBLE PLEDGES 37,200.

PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION

COST 2,569,889.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 2,847,300.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED PLEDGES 20,064,721.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		BELIEVE EVENT	SUPERBOWL 2016	1		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	204,025.	207,225.	33,275.	444,525.
	2	Less: Contributions	192,725.	177,584.	33,275.	403,584.
	3	Gross income (line 1 minus line 2)	11,300.	29,641.		40,941.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	30,075.	165,199.		195,274.
	7	Food and beverages	23,041.			23,041.
	8	Entertainment				
	9	Other direct expenses	9,853.	12,043.		21,896.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Subtract line 10 from line 3, column (d)					-199,270.

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				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7	Direct expense summary. Add lines 2 through 5 in column (d)					
8	Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

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

Name ▶ _____

Address ▶ _____

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law 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)*

Lined area for supplemental information.

**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

2015

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF THE BAY AREA** Employer identification number **94-1312348**

Part I General Information on Grants and Assistance

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

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

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 non-cash assistance	(h) Purpose of grant or assistance
ABODE SERVICES 40849 FREMONT BOULEVARD FREMONT, CA 94538	94-3087060	501C3	6,374.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ABS CBN FOUNDATION 150 SHORELINE DRIVE REDWOOD CITY, CA 94065	94-3292281	501C3	7,147.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ALAMEDA COUNTY COMMUNITY FOOD BANK INC - PO BOX 2599 - OAKLAND, CA 94614	94-2960297	501C3	6,115.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ALISA ANN RUCH BURN FOUNDATION NORTHERN CALIFORNIA OFFICE - 4534 MISSION STREET, SUITE 5 - SAN FRANCISCO, CA 94112	23-7162017	501C3	9,505.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ALZHEIMERS ASSOCIATION NORTHERN CALIFORNIA AND NORTHERN NEVADA - 2290 NORTH FIRST STREET, SUITE 101 - SAN JOSE, CA 95131	94-2897949	501C3	7,975.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AMERICAN CANCER SOCIETY, INC. CALIFORNIA DIVISION, INC. - 71 STEVENSON STREET, SUITE 400 - SAN FRANCISCO, CA 94105	13-1788491	501C3	12,378.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **219.**

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

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

Schedule I (Form 990) (2015)

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
AMERICAN CONSERVATORY THEATER 30 GRANT AVENUE, 7TH FLOOR SAN FRANCISCO, CA 94108	94-6135772	501C3	19,908.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AMERICAN RED CROSS, BAY AREA CHAPTER 05503 - 1663 MARKET STREET - SAN FRANCISCO, CA 94103	53-0196605	501C3	58,687.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ARC OF SAN FRANCISCO 1500 HOWARD STREET SAN FRANCISCO, CA 94103	94-1415287	501C3	5,675.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ARTSPAN 934 BRANNAN STREET SAN FRANCISCO, CA 94103	94-3148481	501C3	8,800.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ASIAN ART MUSEUM 200 LARKIN STREET SAN FRANCISCO, CA 94102	94-1704765	501C3	10,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AVALON ACADEMY 818 MAHLER ROAD BURLINGAME, CA 94010	20-1651912	501C3	12,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA DISCOVERY MUSEUM 557 MCREYNOLDS ROAD SAUSALITO, CA 94965	68-0033227	501C3	11,600.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA WOMEN'S & CHILDREN'S CENTER - 318 LEAVENWORTH STREET - SAN FRANCISCO, CA 94102	94-2722718	501C3	5,208.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BENICIA EDUCATION FOUNDATION PO BOX 1611 BENICIA, CA 94510	68-0173278	501C3	5,006.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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
BERKELEY REPERTORY THEATRE 999 HARRISON STREET BERKELEY, CA 94710	94-1679756	501C3	40,400.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BISHOP O'DOWD HIGH SCHOOL 9500 STEARNS AVENUE OAKLAND, CA 94605		501C3	23,750.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOY SCOUTS MARIN COUNCIL 225 WEST END AVE. SAN RAFAEL, CA 94901	94-1156323	501C3	6,300.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS & GIRLS CLUB OAKLAND PO BOX 23203 OAKLAND, CA 94623	94-1279794	501C3	7,706.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS & GIRLS CLUB SAN FRANCISCO 380 FULTON STREET SAN FRANCISCO, CA 94102	94-1156608	501C3	6,720.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE STREET NW ATLANTA, GA 30309	13-5562976	501C3	5,970.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BRANSON SCHOOL PO BOX 887 ROSS, CA 94957	94-0338330	501C3	8,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BREAKTHROUGH COLLABORATIVE P.O. BOX 2892 SAN FRANCISCO, CA 94123	94-3140620	501C3	20,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BULLIS-PURISSIMA ELEMENTARY SCHOOL FDN - 102 WEST PORTOLA AVENUE - LOS ALTOS, CA 94022	48-1298690	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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
CABRILLO EDUCATION FOUNDATION PO BOX 354 HALF MOON BAY, CA 94019	94-2976402	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALGUNS FOUNDATION 970 RESERVE DRIVE, SUITE 133 ROSEVILLE, CA 95678	26-2794094	501C3	8,885.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALICO CENTER 524 ESTUDILLO AVE SAN LEANDRO, CA 94577	94-3256781	501C3	8,600.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALIFORNIA STATE PARKS FOUNDATION 50 FRANCISCO STREET, SUITE 110 SAN FRANCISCO, CA 94133	94-1707583	501C3	5,620.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CAMP TAYLOR 5424 PIRRONE ROAD SALIDA, CA 95368	04-3709177	501C3	16,951.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CANCER PREVENTION INSTITUTE CALIFORNIA - 2201 WALNUT AVENUE, SUITE 300 - FREMONT, CA 94538	23-7427232	501C3	5,417.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CANYON CREEK PRESBYTERIAN CHURCH 9015 S GALE RIDGE ROAD SAN RAMON, CA 94582	68-0152944	501C3	65,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CARONDELET HIGH SCHOOL 1133 WINTON DRIVE CONCORD, CA 94518	94-3333365	501C3	38,700.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHEDRAL SCHOOL FOR BOYS 1275 SACRAMENTO ST SAN FRANCISCO, CA 94108	94-1156846	501C3	39,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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CATHOLIC CHARITIES OF SOLANO, INC. 125 CORPORATE PLACE, STE A VALLEJO, CA 94590	46-5010936	501C3	5,069.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHOLIC CHARITIES OF THE EAST BAY 433 JEFFERSON STREET OAKLAND, CA 94607	94-2677202	501C3	16,395.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHOLIC CHARITIES SAN FRANCISCO, MARIN, AND SAN FRANCISCO - 990 EDDY STREET - SAN FRANCISCO, CA 94109	94-1498472	501C3	6,528.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHOLIC COMMUNITY OF PLEASANTON PO BOX 817 PLEASANTON, CA 94566		501C3	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDREN NOW 1404 FRANKLIN STREET, SUITE 700 OAKLAND, CA 94612	94-3059243	501C3	10,639.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDREN'S CREATIVITY MUSEUM 221 FOURTH STREET SAN FRANCISCO, CA 94103	94-3178735	501C3	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDREN'S HOSPITAL & RESEARCH CENTER FOUNDATION - PO BOX 45339 - SAN FRANCISCO, CA 94145	94-1657474	501C3	14,317.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDRENS HUNGER FUND 13931 BALBOA BLVD SYLMAR, CA 91342	95-4335462	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHRIST COMMUNITY CHURCH OF THE NAZARENE - PO BOX 1486 - SAN RAMON, CA 94583	23-7429068	501C3	13,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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CHRONICLE SEASON OF SHARING FUND PO BOX 44740 SAN FRANCISCO, CA 94144	94-3019992	501C3	100,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHURCH OF JESUS CHRIST LDS CORPORATION OF THE PRESIDENT - 50 E NORTH TEMPLE STREET - SALT LAKE CITY, UT 84150	87-0234341	501C3	28,772.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CITY CHURCH OF SAN FRANCISCO PO BOX 641049 SAN FRANCISCO, CA 94164		501C3	18,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CITY TEAM MINISTRIES OF SAN FRANCISCO - 164 6TH STREET - SAN FRANCISCO, CA 94103	51-0163302	501C3	10,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COLLEGE PREPARATORY SCHOOL OAKLAND 6100 BROADWAY OAKLAND, CA 94618	94-1492272	501C3	12,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COMPASS FAMILY SERVICES 49 POWELL STREET, 3RD FLOOR SAN FRANCISCO, CA 94102	94-1156622	501C3	26,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CONSERVATION CORPS NORTH BAY 27 LARKSPUR ST SAN RAFAEL, CA 94901	94-2831592	501C3	7,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CORNERSTONE FELLOWSHIP 348 W CANYONS PKWY LIVERMORE, CA 94551	94-3178882	501C3	13,090.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DE LA SALLE HIGH SCHOOL 1130 WINTON DR (DEVELPMNT OFC) CONCORD, CA 94518	68-0311262	501C3	12,831.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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

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DIABETIC YOUTH FOUNDATION 5167 CLAYTON ROAD, STE F CONCORD, CA 94521	94-6003673	501C3	6,290.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EAST BAY COLLEGE FUND 2030 FANKLIN STREET, SUITE 210 OAKLAND, CA 94612	54-2103707	501C3	6,410.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EAST BAY COMMUNITY LAW CENTER 2921 ADELINE STREET BERKELEY, CA 94703	94-3042565	501C3	9,666.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EAST BAY SPCA 8323 BALDWIN ST OAKLAND, CA 94621	94-1322202	501C3	10,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EAST OAKLAND YOUTH DEVELOPMENT CENTER - 8200 INTERNATIONAL BLVD. - OAKLAND, CA 94621	23-7334590	501C3	11,289.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EDGEWOOD CENTER FOR CHILDREN & FAMILIES - 1801 VICENTE STREET - SAN FRANCISCO, CA 94116	94-1186168	501C3	19,160.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EDUCATIONAL FOUNDATION OF ORINDA 21 'C' ORINDA WAY #123 ORINDA, CA 94563	94-2623617	501C3	5,600.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EMBARCADERO YMCA 50 CALIFORNIA STREET, SUITE 650 SAN FRANCISCO, CA 94111	94-0997140	501C3	5,699.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EXPLORATORIUM PIERS 15/17 SAN FRANCISCO, CA 94111	94-1696494	501C3	27,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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

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FAMILIES HELPING FAMILIES 3101 BUSCH DRIVE FAIRFIELD, CA 94535	68-0148410	501C3	8,221.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FAMILY HOUSE- SAN FRANCISCO 540 MISSION BAY BLVD., NORTH SAN FRANCISCO, CA 94158	94-2722663	501C3	24,396.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FIRST HEBREW CONGREGATION OF OAKLAND TEMPLE SINAI - 2808 SUMMIT STREET - OAKLAND, CA 94609		501C3	25,230.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FIRST PLACE FOR YOUTH 426 17TH STREET OAKLAND, CA 94612	94-3341034	501C3	8,288.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FISHER HOUSE FOUNDATION 111 ROCKVILLE PIKE, SUITE 420 ROCKVILLE, MD 20850	11-3158401	501C3	5,530.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FOOD BANK OF CONTRA COSTA & SOLANO PO BOX 6324 CONCORD, CA 94524	94-2418054	501C3	74,105.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FRIENDS OF SAN FRANCISCO ANIMAL CARE AND CONTROL - 1200 15TH STREET - SAN FRANCISCO, CA 94103	94-3371620	501C3	7,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVE STE 1 SAN FRANCISCO, CA 94129	94-2699528	501C3	7,800.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
GIRL SCOUTS OF NORTHERN CALIFORNIA 1650 HARBOR BAY PARKWAY, SUITE 100 ALAMEDA, CA 94502	94-1551410	501C3	6,352.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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HABITAT FOR HUMANITY EAST BAY/SILICON VALLEY - 2619 BROADWAY #205 - OAKLAND, CA 94612	94-3053687	501C3	9,426.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HAMILTON FAMILY CENTER 1631 HAYES STREET SAN FRANCISCO, CA 94117	94-3055602	501C3	21,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HAMLIN SCHOOL 2120 BROADWAY SAN FRANCISCO, CA 94115	94-1393894	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HEAD ROYCE SCHOOL OF OAKLAND 4315 LINCOLN AVENUE OAKLAND, CA 94602	94-1518656	501C3	6,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	52-1481896	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JEFFERSON UNIVERSITY HOSPITAL OFFICE OF INSTITUTIONAL ADVANCEMENT - 125 SOUTH 9TH STREET, SUITE 600 - PHILADELPHIA,	23-2829095	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JEWISH FAMILY & CHILDREN'S SERVICES OF THE EAST BAY - 2484 SHATTUCK AVE #210 - BERKELEY, CA 94704	94-3250304	501C3	5,800.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JUSTICE & DIVERSITY CENTER OF THE BAR ASSN OF SAN FRANCISCO - 301 BATTERY STREET, THIRD FLOOR - SAN FRANCISCO, CA 94111	94-2931349	501C3	7,199.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
KEEN SAN FRANCISCO PO BOX 191321 SAN FRANCISCO, CA 94119	52-1767631	501C3	8,400.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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KIPP FOUNDATION 135 MAIN STREET, SUITE 1700 SAN FRANCISCO, CA 94105	94-3362724	501C3	10,165.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LA CASA DE LAS MADRES 1663 MISSION STREET, SUITE 225 SAN FRANCISCO, CA 94103	94-2330864	501C3	16,088.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LARKIN STREET YOUTH SERVICES 134 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	94-2917999	501C3	21,563.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LEGAL AID SOCIETY EMPLOYMENT LAW CENTER - 180 MONTGOMERY STREET, SUITE 600 - SAN FRANCISCO, CA 94104	94-2783401	501C3	7,800.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LICK WILMERDING HIGH SCHOOL 755 OCEAN AVE SAN FRANCISCO, CA 94112	94-1186156	501C3	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MAKE A WISH FOUNDATION GREATER BAY AREA - 55 HAWTHORNE STREET #800 - SAN FRANCISCO, CA 94105	94-2958481	501C3	16,376.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MARIN BRAIN INJURY NETWORK 1132 MAGNOLIA AVENUE LARKSPUR, CA 94939	68-0105213	501C3	5,150.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MEALS ON WHEELS SENIOR OUTREACH SERVICES - 1300 CIVIC DRIVE - WALNUT CREEK, CA 94596	68-0044205	501C3	6,740.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MIT SLOAN SCHOOL OF MANAGEMENT 77 MASSACHUSETTS AVE, E60-300 CAMBRIDGE, MA 02139		501C3	25,965.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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MONTEREY BAY AQUARIUM 886 CANNERY ROW MONTEREY, CA 93940	94-2487469	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MORAGA EDUCATIONAL FOUNDATION PO BOX 34 MORAGA, CA 94556	94-2791659	501C3	8,800.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
NUEVA SCHOOL 6565 SKYLINE BLVD. HILLSBOROUGH, CA 94010	94-1633387	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
OAKLAND MUSEUM OF CALIFORNIA FOUNDATION - 1000 OAK STREET, DEVELOPMENT - OAKLAND, CA 94607	94-3094513	501C3	6,040.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ON LOK INC 1333 BUSH STREET SAN FRANCISCO, CA 94109	94-3101464	501C3	9,268.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ONEJUSTICE 433 CALIFORNIA STREET, SUITE 815 SAN FRANCISCO, CA 94104	94-2589423	501C3	7,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PENNSYLVANIA ACADEMY OF FINE ARTS 128 N BROAD STREET PHILADELPHIA, PA 19102	23-1352256	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PHI KAPPA PSI FOUNDATION 5395 EMERSON WAY INDIANAPOLIS, IN 46226	36-6130655	501C3	30,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PHILADELPHIA MUSEUM OF ART PO BOX 7646 PHILADELPHIA, PA 19101	23-1365388	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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PHILIPPINE INTERNATIONAL AID 5226 DIAMOND HEIGHTS BLVD SAN FRANCISCO, CA 94131	94-3008383	501C3	6,951.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PI KAPPA ALPHA EDUCATIONAL FOUNDATION - 8347 WEST RANGE COVE - MEMPHIS, TN 38125	62-6039877	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PLANNED PARENTHOOD FOUNDATION-NATL HQ - 434 WEST 33RD STREET #12 - NEW YORK, NY 10001	13-1644147	501C3	7,065.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PLANNED PARENTHOOD MAR MONTE 1746 THE ALAMEDA SAN JOSE, CA 95126	94-1583439	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PLANNED PARENTHOOD NORTHERN CALIFORNIA - 2185 PACHECO STREET - CONCORD, CA 94520	94-1575233	501C3	14,161.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PLEASANT HILL ADVENTIST ACADEMY 796 GRAYSON ROAD PLEASANT HILL, CA 94523		501C3	10,211.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PUBLIC ADVOCATES 131 STEUART STREET, SUITE 300 SAN FRANCISCO, CA 94105	23-7103042	501C3	5,600.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
REDLANDS COMMUNITY FOUNDATION PO BOX 8908 REDLANDS, CA 92375	91-2143250	501C3	10,504.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ROYAL FAMILY KIDS CAMP INC 3000 WEST MACARTHUR BOULEVARD, #412 SANTA ANA, CA 92704	33-0380021	501C3	5,596.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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SALVATION ARMY-EAST BAY & MARIN COUNTY - PO BOX 348000 - SACRAMENTO, CA 95834	94-1156347	501C3	10,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAMARITAN HOUSE 4031 PACIFIC BLVD SAN MATEO, CA 94403	23-7416272	501C3	5,812.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO AIDS FOUNDATION 1035 MARKET STREET STE 400 SAN FRANCISCO, CA 94103	94-2927405	501C3	9,190.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94107	94-3041517	501C3	25,514.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO GENERAL HOSPITAL FDN 2789 25TH STREET, SUITE 2028 SAN FRANCISCO, CA 94110	94-3189424	501C3	10,360.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO JAZZ ORGANIZATION 201 FRANKLIN STREET SAN FRANCISCO, CA 94102	94-2990335	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO SPCA 201 ALABAMA STREET SAN FRANCISCO, CA 94103	94-0836580	501C3	8,147.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAVE THE CHILDREN 501 KINGS HWY E, SUITE 400 FAIRFIELD, CT 06825	06-0726487	501C3	6,250.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SECOND HARVEST FOOD BANK-SANTA CLARA AND SAN MATEO - 750 CURTNER AVENUE - SAN JOSE, CA 95125	94-2614101	501C3	5,243.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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SELF HELP FOR THE ELDERLY 731 SANSOME STREET, SUITE 100 SAN FRANCISCO, CA 94111	94-1750717	501C3	11,652.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SHELTER INC OF CONTRA COSTA COUNTY 1815 ARNOLD DRIVE MARTINEZ, CA 94553	68-0117241	501C3	12,876.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SHEN YUN PERFORMING ARTS 140 GALLEY HILL ROAD CUDDEBACKVILLE, NY 12729	20-8812402	501C3	9,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SMILE TRAIN INC 41 MADISON AVENUE, #28TH FLOOR NEW YORK, NY 10010	13-3661416	501C3	6,140.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SPARK LARKSPUR SCHOOLS FOUNDATION 230 DOHERTY DRIVE LARKSPUR, CA 94939	94-2934350	501C3	5,150.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SPCA OF SOLANO COUNTY PO BOX 356 VACAVILLE, CA 95696	94-2607843	501C3	5,478.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST ALBERTS PRIORY 5890 BIRCH COURT OAKLAND, CA 94618		501C3	5,014.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST DOMINICS CATHOLIC CHURCH 2390 BUSH STREET SAN FRANCISCO, CA 94115		501C3	11,352.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST DOMINICS CHURCH 475 EAST I STREET BENICIA, CA 94510		501C3	5,485.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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
ST FRANCIS EPISCOPAL CHURCH 399 SAN FERNANDO WAY SAN FRANCISCO, CA 94127	94-1508873	501C3	7,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST JUDE CHILDRENS RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501C3	28,658.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST MARY-VIRGIN EPISCOPAL CHURCH 2325 UNION STREET SAN FRANCISCO, CA 94123		501C3	6,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST. ANTHONY FOUNDATION 150 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	94-1513140	501C3	25,144.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST. JAMES ANTIOCHIAN ORTHODOX CHURCH - 925 SOUTH MELROSE STREET - PLACENTIA, CA 92870		501C3	5,382.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
STANFORD UNIVERSITY P.O. BOX 20466 STANFORD, CA 94309	94-1156365	501C3	15,525.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SUMMER SEARCH FOUNDATION 101 HOWARD STREET, SUITE 250 SAN FRANCISCO, CA 94105	68-0200138	501C3	14,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SYRACUSE UNIVERSITY-NY 820 COMCTOCK AVENUE, SUITE 100 SYRACUSE, NY 13244	15-0532081	501C3	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
TEACH FOR AMERICA BAY AREA P.O. BOX 398296 SAN FRANCISCO, CA 94139	13-3541913	501C3	5,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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

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THE FATHERS HOUSE 126 PEABODY ROAD VACAVILLE, CA 95687	68-0408159	501C3	8,597.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
TONY LA RUSSA'S ANIMAL RESCUE FOUNDATION - 2890 MITCHELL DRIVE - WALNUT CREEK, CA 94598	68-0240341	501C3	5,458.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
TRI VALLEY HAVEN FOR WOMEN, INC. PO BOX 2190 LIVERMORE, CA 94551	94-2462357	501C3	11,249.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
TRIPS FOR KIDS 610 4TH STREET SAN RAFAEL, CA 94901	68-0159458	501C3	8,392.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
TRUSTEES OF UNIVERSITY OF PENNSYLVANIA THE PENN FUND - 3451 WALNUT STREET - PHILADELPHIA, PA 19104	23-1352685	501C3	5,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UC REGENTS/UC SANTA BARBARA DEVELOPMENT OFFICE SANTA BARBARA, CA 93106	23-7314834	501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UC SANTA CRUZ FOUNDATION 1156 HIGH STREET SANTA CRUZ, CA 95064	23-7394590	501C3	6,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNION CONGREGATIONAL CHURCH 51 WOODLAND ROAD, APT. 1 ATTENTION: ROBE - CAPE ELIZABETH, ME 04107		501C3	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNITED WAY MONTEREY COUNTY 60 GARDEN COURT, SUITE 350 MONTEREY, CA 93940	94-1322169	501C3	5,386.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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
UNITED WAY OF THE WINE COUNTRY 975 CORPORATE CENTER PARKWAY, SUITE SANTA ROSA, CA 95407	94-1669646	501C3	7,098.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNITED WAY SILICON VALLEY 1400 PARKMOOR AVENUE, SUITE 250 SAN JOSE, CA 95126	94-1450153	501C3	42,301.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNITED WAY SOUTHERN NEVADA PO BOX 30910 LAS VEGAS, NV 89173	88-0071328	501C3	6,216.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
URBAN SCHOOL OF SAN FRANCISCO 1563 PAGE ST SAN FRANCISCO, CA 94117	94-1622034	501C3	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
VANGUARD CHARITABLE ENDOWMENT PROGRAM - PO BOX 3075 - SOUTHEASTERN, PA 19398	23-2888152	501C3	188,240.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WATCHTOWER BIBLE AND TRACT SOCIETY OF PENNSYLVANIA - 25 COLUMBIA HEIGHTS - BROOKLYN, NY 11201	11-1857820	501C3	6,851.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WESTERN CENTER ON LAW & POVERTY 3701 WILSHIRE BLVD, STE 208 LOS ANGELES, CA 90010	95-2897721	501C3	5,680.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	13-1789318	501C3	35,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WOUNDED WARRIOR PROJECT PO BOX 758517 TOPEKA, KS 66675	20-2370934	501C3	22,415.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

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
YALE LAW SCHOOL FUND PO BOX 2038 NEW HAVEN, CT 06521	06-0646973	501C3	7,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
YMCA OF SAN FRANCISCO 50 CALIFORNIA STREET, SUITE 650 SAN FRANCISCO, CA 94111	94-0997140	501C3	11,874.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ZEN HOSPICE CENTER 273 PAGE STREET SAN FRANCISCO, CA 94102	94-3155375	501C3	7,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CONTRA COSTA CRISIS CENTER 307 LENNON LANE WALNUT CREEK, CA 94598	94-1747227	501C3	69,167.	0.			PROGRAM GRANT TO SUPPORT 2-1-1 INITIATIVE SERVICES
EDEN I&R, INC. 570 B STREET HAYWARD, CA 94541	94-2339050	501C3	50,000.	0.			PROGRAM GRANT TO SUPPORT 2-1-1 INITIATIVE SERVICES
UNITED WAY SILICON VALLEY 1400 PARKMOOR AVENUE, SUITE 250 SAN JOSE, CA 95126	94-1450153	501C3	198,000.	0.			PROGRAM GRANT TO SUPPORT 2-1-1 INITIATIVE SERVICES & ECONOMIC SUCCESS
CHILDREN AND FAMILY POLICY CENTER 505 5TH AVENUE, STE 4040 DES MOINES, IA 50309	42-1378567	501C3	25,000.	0.			PROGRAM GRANT TO SUPPORT COMMUNITY SCHOOLS SERVICES
COMMUNITY INITIATIVES 354 PINE STREET, SUITE 7000 SAN FRANCISCO, CA 94104	94-3255070	501C3	20,000.	0.			PROGRAM GRANT TO SUPPORT COMMUNITY SCHOOLS SERVICES
REDWOOD CITY SCHOOL DISTRICT 750 BRADFORD STREET0 REDWOOD CITY, CA 94063	94-3034018	501C3	121,400.	0.			PROGRAM GRANT TO SUPPORT COMMUNITY SCHOOLS SERVICES

Schedule I (Form 990)

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
SAN FRANCISCO STUDY CENTER 944 MARKET STREET, STE. 701 SAN FRANCISCO, CA 94102	94-2138883	501C3	20,000.	0.			PROGRAM GRANT TO SUPPORT COMMUNITY SCHOOLS SERVICES
FIGHTING BACK PARTNERSHIP 505 SANTA CLARA STREET, THIRD FLOOR - VALLEJO, CA 94590	68-0298092	501C3	42,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS & COMMUNITY SCHOOL SERVICES
ON THE MOVE 780 LINCOLN AVENUE NAPA, CA 94559	75-3149095	501C3	85,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS & COMMUNITY SCHOOL SERVICES
MISSION ECONOMIC DEVELOPMENT AGENCY - 2301 MISSION STREET, SUITE 301 - SAN FRANCISCO, CA 94110	51-0187791	501C3	172,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS & JOBS+ SERVICES
ALAMEDA COUNTY SOCIAL SERVICES AGENCY - 2000 SAN PABLO AVE., FOURTH FL., STE 445 - OAKLAND, CA 94612	94-6000501	501C3	15,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
ALLEN TEMPLE BAPTIST CHURCH 8501 INTERNATIONAL BLVD. OAKLAND, CA 94621	94-1747125	501C3	6,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
AMERICAN CANYON FAMILY RESOURCE CENTER - 3423 BROADWAY ST, SUITE D1 - AMERICAN CANYON, CA 94503	36-4612853	501C3	125,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
AMERICAN CANYON FAMILY RESOURCE CENTER - 3423 BROADWAY ST, SUITE D1 - AMERICAN CANYON, CA 94503	36-4612853	501C3	5,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
BAY AREA FINANCIAL RESOURCE CENTER 699 SERRAMONTE BLVD 232 DALY CITY, CA 94015	27-0920145	501C3	7,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES

Schedule I (Form 990)

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

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BRIGHTER BEGINNINGS 2213 BUCHANAN RD #103 ANTIOCH, CA 94531	94-2949749	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CATHOLIC CHARITIES OF SOLANO, INC 125 CORPORATE PLACE, SUITE A VALLEJO, CA 94590	46-5010936	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CHABOT LAS-POSITAS COMMUNITY COLLEGE DISTRICT - 6300 VILLAGE PARKWAY, SUITE 100 - DUBLIN, CA 94568	23-7074515	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CHILDREN'S NETWORK OF SOLANO COUNTY - 2320 COURAGE DR., #107 - FAIRFIELD, CA 94533	68-0014506	501C3	301,223.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CHINESE NEWCOMERS SERVICE CENTER 777 STOCKTON ST., STE 104 SAN FRANCISCO, CA 94108	94-2152893	501C3	10,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CITY OF FAIRFIELD 1000 WEBSTER STREET FAIRFIELD, CA 94533		501C3	8,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
CITY OF VACAVILLE 660 MERCHANT STREET VACAVILLE, CA 95688	94-6000447	501C3	7,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
COASTSIDE HOPE P.O. BOX 1089 EL GRANADA, CA 94018	51-0199747	501C3	5,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
COMMUNITY ACTION MARIN 29 MARY STREET SAN RAFAEL, CA 94901	94-6136365	501C3	12,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES

Schedule I (Form 990)

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
COMMUNITY CHILD CARE COUNCIL (4C'S) OF ALAMEDA COUNTY - 22351 CITY CENTER DR. STE. 100 - HAYWARD, CA 94541	23-7218859	501C3	10,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
COMMUNITY RESOURCES FOR INDEPENDENT LIVING - 439 A STREET - HAYWARD, CA 94541	94-2598873	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
EAGLE VILLAGE COMMUNITY CENTER YOUTH & FAMILY - P O BOX 10408 - OAKLAND, CA 94610	27-0243681	501C3	26,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION - 1825 SAN PABLO AVE SUITE 200 - OAKLAND , CA 94612	51-0171851	501C3	31,131.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION - 1825 SAN PABLO AVE SUITE 200 - OAKLAND , CA 94612	51-0171851	501C3	15,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
FREMONT FAMILY RESOURCE CENTER CORPORATION - 39155 LIBERTY STREET SUITE A110 PO BOX 5006 - FREMONT, CA 94537	94-3333831	501C3	17,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
FREMONT FAMILY RESOURCE CENTER CORPORATION - 39155 LIBERTY STREET SUITE A110 PO BOX 5006 - FREMONT , CA 94537	94-3333831	501C3	18,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
HAYWARD AREA RECREATION AND PARK DISTRICT - 1099 E STREET - HAYWARD, CA 94541	94-6000728	501C3	7,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
HOMELESS PRENATAL PROGRAM 2500 18TH STREET SAN FRANCISCO, CA 94110	94-3146280	501C3	14,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES

Schedule I (Form 990)

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

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LAO FAMILY COMMUNITY DEVELOPMENT, INC. - 1551 23RD AVE - OAKLAND, CA 94601	94-3115164	501C3	204,593.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
LAO FAMILY COMMUNITY DEVELOPMENT, INC. - 1551 23RD AVE - OAKLAND, CA 94601	94-3115164	501C3	15,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
MISSION ECONOMIC DEVELOPMENT AGENCY - 2301 MISSION STREET, SUITE 301 - SAN FRANCISCO, CA 94110	51-0187791	501C3	15,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
MONUMENT IMPACT 1760 CLAYTON ROAD CONCORD, CA 94520	94-3370919	501C3	14,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
NORTHEAST COMMUNITY FEDERAL CREDIT UNION - 683 CLAY STREET - SAN FRANCISCO, CA 94111	94-2891498	501C3	10,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
ON THE MOVE 780 LINCOLN AVENUE NAPA, CA 94559	75-3149095	501C3	6,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
OPERATION HOPE INC 707 WILSHIRE BLVD, SUITE 3030 LOS ANGELES, CA 90017	95-4378084	501C3	33,167.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
PROJECT READ-SOUTH SAN FRANCISCO PUBLIC LIBRARY - 840 WEST ORANGE AVENUE - SOUTH SAN FRANCISCO, CA 94080	94-3191775	501C3	9,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
RICHMOND COMMUNITY FOUNDATION 1014 FLORIDA AVENUE, SUITE 200 RICHMOND, CA 94804	94-3337754	501C3	822,125.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES

Schedule I (Form 990)

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

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RUBICON PROGRAMS, INC. 101 BROADWAY RICHMOND, CA 94804	94-2301550	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SAMARITAN HOUSE 4031 PACIFIC BLVD. SAN MATEO, CA 94403	23-7416272	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SAN ANTONIO COMMUNITY DEVELOPMENT CORPORATION - 2228 E 15TH STREET - OAKLAND, CA 94606	94-2675448	501C3	18,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT-COLLEGE OF SAN MATEO - 3401 CSM DRIVE - SAN MATEO, CA 94402	94-3084147	501C3	133,167.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT-COLLEGE OF SAN MATEO - 3401 CSM DRIVE - SAN MATEO, CA 94402	94-3084147	501C3	7,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT-SKYLINE COLLEGE - 3300 COLLEGE DRIVE - SAN BRUNO, CA 94066	94-3084147	501C3	6,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SELF-HELP ECONOMIC DEVELOPMENT, INC. - 1330 BROADWAY, SUITE 604 - OAKLAND, CA 94612	20-5330006	501C3	10,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY, INC. - 1900 FRUITVALE AVE STE 2A - OAKLAND, CA 94601	94-1670490	501C3	8,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
SPARKPOINT ECC/ BAY POINT WORKS 3105 WILLOW PASS ROAD #3 BAY POINT, CA 94565	94-3337754	501C3	7,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES

Schedule I (Form 990)

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
TAX-AID 55 NEW MONTGOMERY STREET, SUITE 500 SAN FRANCISCO, CA 94105	94-3062518	501C3	25,000.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
TAX-AID 55 NEW MONTGOMERY STREET, SUITE 500 SAN FRANCISCO, CA 94105	94-3062518	501C3	17,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
THE SAN FRANCISCO WOMENS CENTERS 3543 18TH STREET SAN FRANCISCO, CA 94110	94-1730620	501C3	7,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
UPVALLEY FAMILY CENTERS 1440 SPRING ST ST. HELENA, CA 94574	80-0023012	501C3	12,500.	0.			PROGRAM GRANT TO SUPPORT ECONOMIC SUCCESS SERVICES
10,000 DEGREES 781 LINCOLN AVE., SUITE 140 SAN RAFAEL, CA 94901	95-3667812	501C3	33,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
BAY AREA COMMUNITY RESOURCES 171 CARLOS DRIVE SAN RAFAEL, CA 94903	94-2346815	501C3	45,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
CITY OF OAKLAND 250 FRANK H OGAWA PLAZA OAKLAND, CA 94612	94-6000384	501C3	90,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
COMMUNITY YOUTH CENTER OF SF 1038 POST STREET SAN FRANCISCO, CA 94109	94-1728818	501C3	45,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
LAVENDER YOUTH RECREATION AND INFO CENTER - 127 COLLINGWOOD STREET - SAN FRANCISCO, CA 94114	94-3227296	501C3	20,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES

Schedule I (Form 990)

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

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SUCCESS CENTER SAN FRANCISCO 375 WOODSIDE AVE., BLDG W-20 SAN FRANCISCO, CA 94127	94-2844443	501C3	45,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
URBAN STRATEGIES COUNCIL INC 1720 BROADWAY, 2ND FLOOR OAKLAND, CA 94612	94-3044453	501C3	35,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
YMCA OF SAN FRANCISCO 50 CALIFORNIA STREET, SUITE 650 SAN FRANCISCO, CA 94111	94-0997140	501C3	60,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
YOUNG COMMUNITY DEVELOPERS, INC 1715 YOSEMITE AVENUE SAN FRANCISCO, CA 94124	94-2187776	501C3	45,000.	0.			PROGRAM GRANT TO SUPPORT JOBS+ SERVICES
COMMUNITY ACTION MARIN 29 MARY STREET SAN RAFAEL, CA 94901	94-6136365	501C3	252,500.	0.			PROGRAM GRANT TO SUPPORT OTHER COMMUNITY SERVICES
SAN FRANCISCO BAY AREA LABOR FOUNDATION - 1188 FRANKLIN STREET, SUITE 203 - SAN FRANCISCO, CA 94109	94-2687066	501C3	12,500.	0.			PROGRAM GRANT TO SUPPORT OTHER COMMUNITY SERVICES

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

PART I, LINE 2:

FUNDING ALLOCATED TO AGENCIES AS DIRECTED BY DONORS:

UNITED WAY OF THE BAY AREA RESPONSIBLY FULFILLS DONOR INTENT, INCLUDING REQUESTS TO FUND SPECIFIC NONPROFITS THAT MEET THE IRS QUALIFICATIONS OF A TAX EXEMPT CHARITABLE ORGANIZATION UNDER SECTION 170(C). ELIGIBLE ORGANIZATIONS ARE ALSO REQUIRED TO BE IN COMPLIANCE WITH THE SPIRIT AND INTENT OF THE USA PATRIOT ACT AND OTHER COUNTER TERRORISM LAWS.

ALLOCATIONS AND RE-GRANTS TO PARTNERS:

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2015

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF THE BAY AREA

Employer identification number
94-1312348

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes 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

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 in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 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?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7		<input checked="" type="checkbox"/>
8		<input checked="" type="checkbox"/>
9		

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

Schedule J (Form 990) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ANNE WILSON CEO	(i)	294,303.	0.	10,633.	46,695.	38,928.	390,559.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ERIC MCDONNELL COO	(i)	242,086.	51.	8,785.	26,378.	17,785.	295,085.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOAN BRAUN CHIEF FINANCIAL & ADMIN OFFICER	(i)	183,390.	51.	3,603.	11,395.	26,957.	225,396.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TSE MING TAM VP, COMMUNITY INVESTMENT	(i)	118,167.	54.	2,487.	7,975.	23,973.	152,656.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOHN SCHAUER VP, INFORMATION TECHNOLOGY	(i)	115,532.	54.	10,028.	20,200.	24,118.	169,932.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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 J, PART II, COLUMN C:

THE IRS DEFINES OTHER COMPENSATION (COLUMN C) AS REPORTED ON SCHEDULE J TO INCLUDE THE ANNUAL INCREASE IN THE ACTUARIAL VALUE OF A DEFINED BENEFIT PLAN. THREE CURRENT DIRECTORS, OFFICERS OR KEY EMPLOYEES WERE PART OF THE DEFINED BENEFITS PLAN - THE CEO, COO AND VP, IT. FOR UWBA'S PURPOSES, BOTH THE COMPANY PORTION OF THE CEO'S 401K EXPENSES (\$21,200) AS WELL AS THE ANNUAL ACTUARIAL VALUE OF THE NOW FROZEN DEFINED BENEFIT PLAN (\$25,495), HAVE BEEN INCLUDED TO ARRIVE AT \$46,695.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Name of the organization **UNITED WAY OF THE BAY AREA** Employer identification number **94-1312348**

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	24	530,708.	PROCEEDS FROM SALE
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	X	1	28,000.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SUPERBOWL 50)	X	1	71,685.	FMV
26 Other ▶ (PROGRAM SUPPL)	X	1	1,179.	FMV
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 is not required to be used for exempt purposes for the entire holding period?		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 non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Horizontal lines for supplemental information input.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

UNITED WAY OF THE BAY AREA

Employer identification number

94-1312348

FORM 990, PART I, LINE 6

VOLUNTEERS

VOLUNTEER NUMBER INCLUDES VOLUNTEERS WHO PROVIDE DIRECT SERVICE TO

UNITED WAY OF THE BAY AREA AS BOARD MEMBERS, VOLUNTEER TAX PREPARERS,

FUNDRAISERS AND CAMPAIGN COORDINATORS, ADVOCACY AND PUBLIC POLICY

VOLUNTEERS, AND VOLUNTEERS IN OTHER UNITED WAY OF THE BAY AREA

PROGRAMS, AS WELL AS VOLUNTEER MATCHING REFERRALS THAT MATCH AND

MOBILIZE VOLUNTEERS STRATEGICALLY TO MEET IDENTIFIED COMMUNITY NEEDS.

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

INCREASING CREDIT SCORES; AND (4) INCREASING SAVINGS. THE SPARKPOINT

REGIONAL NETWORK INCLUDES MORE THAN 75 OUTSTANDING PARTNER

ORGANIZATIONS ACROSS THE BAY AREA.

RECENTLY SPARKPOINT HAS EXPANDED WORK INTO COMMUNITY COLLEGES AND

COMMUNITY SCHOOLS. SPARKPOINT IN COMMUNITY SCHOOLS TAKES A

TWO-GENERATION APPROACH TO IMPROVE THE IMMEDIATE AND LONG-TERM

FINANCIAL STABILITY OF PARENTS WHILE ENSURING THAT CHILDREN ARE HEALTHY

AND SUPPORTED AT SCHOOL. THIS DISRUPTS THE CYCLE OF POVERTY SO THAT

ENTIRE FAMILIES CAN SUCCEED NOW AND FAR INTO THE FUTURE.

SPARKPOINT ALSO RECOGNIZES THAT A GOOD EDUCATION, MARKETABLE SKILLS,

AND A GOOD JOB ARE NEEDED TO LIFT SOMEONE OUT OF POVERTY. THROUGH THE

EXPANSION INTO COMMUNITY COLLEGES, CENTERS ALIGN THEIR STRONGEST

PROGRAMMATIC ASSETS TO IMPROVE THE SCHOOL TO CAREER PATHWAY FOR

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2015)

532211
09-02-15

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LOW-INCOME STUDENTS. THEY ENSURE THAT STUDENTS KNOW MORE ABOUT AVAILABLE CAREER AND EDUCATION OPTIONS, INCLUDING POST-SECONDARY JOB TRAINING AND CERTIFICATE AND DEGREE PROGRAMS. SPARKPOINT ENSURES THAT STUDENTS START AND REMAIN ON A PATH TOWARD A GOOD JOB THROUGH WRAP AROUND SUPPORT SERVICES. UWBA'S STRONG RELATIONSHIPS WITH MAJOR EMPLOYERS ACROSS VARIOUS SECTORS, PROVIDE STUDENTS WITH ACCESS TO WORK BASED LEARNING OPPORTUNITIES AND JOBS.

FY16 HIGHLIGHTS INCLUDE:

-371 CLIENTS ACHIEVED SELF-SUFFICIENT INCOME

-861 CLIENTS ACHIEVED AT LEAST ONE ELEMENT OF FINANCIAL PROSPERITY:

SELF-SUFFICIENT INCOME, 3 MONTHS SAVINGS, 700 CREDIT SCORE, NO

REVOLVING DEBT

-THE REGIONAL NETWORK HAS PLACED 579 CLIENTS IN JOBS, AND HAS AN AVERAGE HOURLY WAGE OF \$16.82

EARN IT! KEEP IT! SAVE IT! (EKS) IS A UWBA-LED COALITION OF PARTNERS THAT PREPARES TAX RETURNS FOR FREE, ENSURING LOW- TO MODERATE-INCOME FAMILIES GET THE REFUNDS AND CREDITS FOR WHICH THEY ARE ELIGIBLE.

DURING THE 2016 TAX SEASON, 3,028 VOLUNTEERS PREPARED MORE THAN 71,526 RETURNS AND BROUGHT BACK OVER \$74.7 MILLION IN REFUNDS. ADDITIONALLY, \$23.1 MILLION OF THOSE REFUNDS WAS IN EARNED INCOME TAX CREDIT (EITC).

EITC GOES TO THE POOREST, MOST VULNERABLE BAY AREA HOUSEHOLDS AND HAS BEEN IDENTIFIED BY POVERTY-FIGHTING EXPERTS AS ONE OF THE MOST

EFFECTIVE PROGRAMS NATIONALLY, LIFTING MILLIONS OF PEOPLE ABOVE THE

FEDERAL POVERTY LEVEL EVERY YEAR. FAMILIES USE THEIR REFUNDS PRIMARILY TO PAY BILLS, RENT, AND TO BUY FOOD OR CLOTHES. THROUGH ITS TAX

PREPARATION EFFORTS, EKS PROVIDES RESOURCES TO MEET BASIC NEEDS, WHICH

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IS CRITICAL TO ENDING THE CYCLE OF POVERTY IN THE BAY AREA. EKS HAS 205 LOCATIONS IN SEVEN COUNTIES, 10 OF WHICH ARE LOCATED AT SPARKPOINT CENTERS. IN ADDITION TO PREPARING TAX RETURNS, EKS USES THE PROGRAM VISIT AS A MOMENT TO OFFER LOW-INCOME FAMILIES THE OPPORTUNITY TO INCREASE THEIR SAVINGS.

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

SAN FRANCISCO ALONE. WITHIN THE NEXT SEVERAL YEARS, JOBS+ EXPECTS TO EXPAND INTO ALL EIGHT COUNTIES SERVED BY UNITED WAY OF THE BAY AREA.

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

OTHER PROGRAMS LIKE UNITED WAYS AROUND THE COUNTRY, UWBA MANAGES THE LOCAL ACTIVITIES OF THE FEDERAL EMERGENCY FOOD AND SHELTER PROGRAM (EFSP), WHICH DISTRIBUTES FEDERAL FUNDS TO LOCAL PROGRAMS THAT FEED AND PROVIDE SHELTER TO PEOPLE IN NEED. IN FY16 UWBA DISTRIBUTED MORE THAN \$2 MILLION IN EIGHT COUNTIES TO AGENCIES THAT PROVIDED MORE THAN 1.5 MILLION MEALS AND OVER 70,000 SHELTER NIGHTS.

LABOR COMMUNITY SERVICES - THE LONG STANDING LABOR-UNITED WAY PARTNERSHIP COMBINES THE POWER OF MORE THAN 12.5 MILLION WORKING FAMILIES AND THEIR COMMUNITIES TOWARD A SHARED VISION WHERE ALL HAVE THE OPPORTUNITY TO REACH THEIR HIGHEST POTENTIAL. LOCALLY, UWBA'S LABOR COMMUNITY SERVICES PROGRAM CONTINUED ITS ESSENTIAL ROLE OF ASSISTING PEOPLE IN POVERTY THROUGH DIRECT PROVISION OF COMMUNITY SERVICES AND POLICY ADVOCACY. IN FY16, OUR LABOR LIAISONS IN THREE COUNTIES (SAN MATEO, SAN FRANCISCO, AND CONTRA COSTA) HELPED 575 BAY AREA FAMILIES RECEIVE DIRECT HARDSHIP ASSISTANCE WITH HOUSING, HEALTH, UTILITIES, JOB ACCESS ISSUES, AND OTHER EMERGENCIES. THE LIAISONS ALSO WORKED CLOSELY

Name of the organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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WITH UNITED WAY'S OTHER PROGRAMS, HELPING TO REFER POTENTIAL CLIENTS TO EKS, 211 AND SPARKPOINT. THEY FOCUSED ON KEY ISSUES SUCH AS STRENGTHENING THE SAFETY NET FOR IMMIGRANT FAMILIES AND RAISING THE MINIMUM WAGE.

PUBLIC POLICY - UNITED WAY BAY AREA RECOGNIZES THAT IN ORDER TO ACHIEVE OUR GOAL OF ENDING THE CYCLE OF POVERTY IN OUR COMMUNITY, WE MUST ADVANCE PUBLIC POLICIES THAT SUPPORT OUR MISSION. UWBA'S PUBLIC POLICY TEAM INFLUENCES POLICY AND ENGAGES IN ADVOCACY AT ALL LEVELS OF GOVERNMENT. OUR PRIMARY POLICY FOCUS IS TARGETED AT THE LOCAL LEVEL IN OUR SEVEN-COUNTY SERVICE AREA (ALAMEDA, CONTRA COSTA, MARIN, NAPA, SAN FRANCISCO, SAN MATEO, AND SOLANO). IN ADDITION, WE PROVIDE ADVOCACY SUPPORT TO STATE AND FEDERAL ISSUES IMPORTANT TO THE UNITED WAY SYSTEM. IN FY16, OUR EFFORTS SUPPORTED THE REAUTHORIZATION OF THE FEDERAL EARNED INCOME TAX CREDIT AND CALIFORNIA'S ADOPTION OF ITS OWN STATE EITC - WHICH SUPPORTS THE CLIENTS WE SERVE THROUGH OUR EARN IT! KEEP IT! SAVE IT! FREE TAX PREPARATION PROGRAM. ANOTHER KEY VICTORY WAS ACHIEVED ON CHILDREN'S HEALTH CARE, WITH THE EXPANSION OF FULL-SCOPE MEDI-CAL SERVICES TO ALL CHILDREN UNDER AGE 18, REGARDLESS OF IMMIGRATION STATUS. AFTER ACHIEVING THESE POLICY WINS, WE FOCUSED ON THE SUCCESSFUL IMPLEMENTATION OF BOTH NEW STATE PROGRAMS. AT THE LOCAL LEVEL, WE COLLABORATED WITH LABOR AND COMMUNITY PARTNERS TO RAISE THE MINIMUM WAGE IN THE CITIES OF EL CERRITO AND SAN MATEO.

FINALLY, UWBA HAS FORMED A COALITION CALLED RISE TOGETHER, COMPRISING NEARLY 300 LEADING INSTITUTIONS THAT HAVE COME TOGETHER TO CUT POVERTY IN HALF IN THE BAY AREA BY 2020. LAUNCHED BY UWBA IN 2012, RISE TOGETHER CONTINUES TO STAND OUT AS A PIVOTAL REGIONAL STRATEGY THROUGH

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A COLLECTIVE IMPACT APPROACH. IN THE LAST FOUR YEARS, RISE TOGETHER HAS: GIVEN GRANTS TO LOCAL LEADERS AND PARTNERSHIPS WHO ARE FIGHTING POVERTY; SELECTIVELY ENGAGED ON KEY POLICY ISSUES; HOSTED MAJOR EVENTS TO SHOWCASE THE ISSUES AND SOLUTIONS OF POVERTY; AND WON AN AWARD FROM THE NATIONAL ASSOCIATION OF COUNTIES. UWBA STAFFS THE COALITION AND HELPS THE PARTNERS SELECT AND IMPLEMENT KEY INITIATIVES. PARTNERS INCLUDE POLITICAL AND FAITH LEADERS, BUSINESSES, NONPROFITS, GOVERNMENT, ACADEMIA, MEDIA AND OTHERS.

211 INITIATIVE

211 IS A FREE, EASY-TO-REMEMBER PHONE NUMBER AND WEB RESOURCE THAT ANYONE CAN CALL FOR INFORMATION AND REFERRAL TO RESOURCES. LAST YEAR, UWBA AND ITS PARTNER CALL CENTERS IN EIGHT BAY AREA COUNTIES RESPONDED TO 164,814 CALLS. MORE THAN HALF OF THESE REQUESTS CAME FROM THOSE REQUESTING HELP WITH POVERTY/BASIC NEEDS ISSUES SUCH AS FOOD, JOBS AND SHELTER.

IN ADDITION TO DAILY INFORMATION AND REFERRAL, 211 IS A CRITICAL RESOURCE FOR DISASTERS. IN RECENT YEARS, 211 HAS BEEN AVAILABLE FOR RESPONSES TO AN EARTHQUAKE, A TSUNAMI, AND MAJOR FIRES. LOOKING AHEAD UWBA PLANS TO UPDATE 211'S TECHNOLOGY PLATFORM TO MAKE SURE IT IS ACCESSIBLE TO AS MANY PEOPLE IN NEED AS POSSIBLE.

EXPENSES \$ 3,373,028. INCLUDING GRANTS OF \$ 163,482. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1:

EXECUTIVE COMMITTEE IS EMPOWERED WITH LIMITATIONS TO TAKE ACTION ON BEHALF OF THE BOARD BETWEEN ITS REGULARLY SCHEDULED MEETINGS.

Name of the organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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FORM 990, PART VI, SECTION B, LINE 11:

CHIEF FINANCIAL AND ADMINISTRATIVE OFFICER AND CONTROLLER REVIEW FINAL DRAFT OF 990 BEFORE PRESENTING TO ALL VOTING MEMBERS OF THE BOARD FOR INFORMATIONAL REVIEW PRIOR TO SUBMISSION. BOARD MEMBERS HAVE UP TO A WEEK TO RESPOND WITH QUESTIONS AND PRESENT CONCERNS. AFTER THAT, THE 990 IS SUBMITTED TO THE IRS.

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

THE UWBA IS COMMITTED TO THE HIGHEST STANDARDS OF ETHICAL COMPLIANCE. OUR CORPORATE COMPLIANCE POLICY, OUR CODE OF ETHICAL CONDUCT, AND OUR CONFLICT OF INTEREST POLICY ARE POSTED ON OUR INTRANET AND ON OUR ORGANIZATION'S PUBLIC FACING WEB SITE. TAKEN TOGETHER, THEY OUTLINE THE EXPECTATIONS THE UWBA HAS OF ITS EMPLOYEES, VOLUNTEERS, AND REPRESENTATIVES. THE CONFLICT OF INTEREST POLICY CONTAINS SPECIFIC INJUNCTIONS AGAINST ANY PRACTICE OR ACT WHICH CONFLICTS WITH OR APPEARS TO CONFLICT WITH THE INTERESTS OF THE UWBA, BOTH ON AND OFF THE JOB. IT GOES ON TO EXPLICITLY STATE THAT NO EMPLOYEE, VOLUNTEER, OR REPRESENTATIVE SHALL USE HER/HIS POSITION OR INFLUENCE OR INFORMATION TO WHICH THEY HAVE ACCESS TO AS A RESULT OF THEIR ASSOCIATION OR ANY ASSETS OR RESOURCES OF THE UWBA FOR HER/HIS OWN PERSONAL GAIN, FOR TRADING OR FOR THE IMPROPER BENEFIT OF OTHERS.

THE POLICY PROHIBITS PERFORMING COMPENSATED SERVICES FOR OR HAVING A BENEFICIAL INTEREST IN, OR BEING SUBSTANTIALLY OBLIGATED TO (OR A SIMILAR RELATIONSHIP FOR ANY FAMILY MEMBER OR CLOSE RELATIVE), ANY OF UWBA'S SUPPLIERS OF GOODS OR SERVICES OR ANY OTHER ORGANIZATION DOING BUSINESS WITH UWBA UNLESS SUCH FACT HAS BEEN PROPERLY DISCLOSED TO UWBA'S CEO AND TO UWBA'S BOARD, AND SUCH RELATIONSHIP HAS BEEN SPECIFICALLY APPROVED BY THE BOARD ON THE BASIS OF A FULL DISCLOSURE OF THE FACTS.

Name of the organization UNITED WAY OF THE BAY AREA	Employer identification number 94-1312348
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THE CODE OF ETHICAL CONDUCT SPECIFICALLY REQUIRES THE REPORTING OF VIOLATIONS AND THE PROTECTION OF THOSE WHO REPORT VIOLATIONS. OUR CORPORATE COMPLIANCE POLICY LAYS OUT A CLEARLY DEFINED PROCESS FOR EMPLOYEES AND VOLUNTEERS TO FOLLOW IN ORDER TO DISCLOSE ANY REASONABLE BELIEF THAT ANOTHER EMPLOYEE OR VOLUNTEER HAS VIOLATED LEGAL OR INTERNAL POLICY STANDARDS, WHETHER IN THE WORKPLACE OR OTHERWISE AS PART OF UWBA'S ACTIVITIES. INCLUDED IN THAT PROCEDURE IS A REPORT TO BE MADE TO THE BOARD ANNUALLY REGARDING ITEMS BROUGHT TO THE ATTENTION OF THE CORPORATE COMPLIANCE TASKFORCE, THE RESULTS OF THE INVESTIGATION THE TASKFORCE DID, AND THE STEPS TAKEN TO ADDRESS THE CONCERNS RAISED, IF STEPS WERE MERITED. THE TASKFORCE IS COMPOSED OF THE CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER, THE CHIEF FINANCIAL AND ADMINISTRATIVE OFFICER, AND THE CHIEF ETHICS OFFICER.

THE UNITED WAY OF THE BAY AREA HAS AN ANNUAL PROCESS FOR RE-AFFIRMING ITS CONFLICT OF INTEREST, ITS CODE OF ETHICAL CONDUCT, ITS CORPORATE COMPLIANCE AND DIVERSITY POLICIES. IT ALSO HAS A POLICY OF REVIEWING THE POLICIES ON A PERIODIC BASIS.

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

PROCESS FOR DETERMINING COMPENSATION OF TOP MANAGEMENT AND OFFICERS/KEY EMPLOYEES IS THE SAME -

UNITED WAY OF THE BAY AREA HAS A CONTRACTUAL RELATIONSHIP WITH AN INDEPENDENT SALARY CONSULTANT WHO CONSIDERS INDUSTRY, POSITION, EXPERIENCE AND MARKET BEFORE MAKING RECOMMENDATIONS TO UNITED WAY OF THE BAY AREA'S COMPENSATION COMMITTEE. THE COMPENSATION COMMITTEE MEETS AT LEAST TWICE A YEAR TO REVIEW CURRENT DATA, ANALYZE BUDGET ISSUES AND MAKE RECOMMENDATIONS

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TO THE BOARD OF DIRECTORS. MINIMALLY, THE BOARD APPROVES THE COMPENSATION OF THE CEO, CFAO AND OTHER KEY EMPLOYEES ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE UNITED WAY OF THE BAY AREA WEBSITE AS WELL AS BY WRITTEN OR IN-PERSON REQUEST.

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

CHANGE IN PENSION LIABILITY IN EXCESS OF INTANGIBLE PENSION ASSETS	-2,569,889.
UNCOLLECTIBLE PLEDGES	-37,200.
TOTAL TO FORM 990, PART XI, LINE 9	-2,607,089.

FORM 990, PART VIII AND PART IX
UNITED WAY STANDARD OVERHEAD CALCULATION
MANAGEMENT AND GENERAL EXPENSES - \$3,713,473
FUNDRAISING EXPENSES - 2,393,270
TOTAL SUPPORT SERVICES EXPENSES - \$6,106,743
TOTAL REVENUE - \$34,110,400
OVERHEAD PERCENTAGE - 17.90%

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file) - You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	UNITED WAY OF THE BAY AREA	94-1312348
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	550 KEARNY ST, NO. 1000	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	SAN FRANCISCO, CA 94108	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JOAN CATHERINE BRAUN

- The books are in the care of ▶ **550 KEARNY ST, #1000 - SAN FRANCISCO, CA 94108**
Telephone No. ▶ **415-808-4465** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2015**, and ending **JUN 30, 2016**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.