

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2015

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07/01, 2015, and ending 06/30, 2016

B	Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>UNITED WAY OF METROPOLITAN DALLAS, INC.</u>			D Employer identification number <u>75-6005352</u>	
		Doing Business As			E Telephone number <u>(214) 978-0000</u>	
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>1800 N. LAMAR STREET</u>				
		City or town, state or province, country, and ZIP or foreign postal code <u>DALLAS, TX 75202</u>				
F Name and address of principal officer: <u>JENNIFER SAMPSON</u> <u>1800 N. LAMAR STREET DALLAS, TX 75202</u>			G Gross receipts \$ <u>60,222,598.</u>			
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			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
J Website: ▶ <u>WWW.UNITEDWAYDALLAS.ORG</u>			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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: <u>1961</u> M State of legal domicile: <u>TX</u>			
H(c) Group exemption number ▶			If "No," attach a list. (see instructions)			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO IMPROVE THE LIVES IN OUR COMMUNITIES BY COLLABORATING WITH COMMUNITY ORGANIZATIONS TO DELIVER HEALTH AND HUMAN SERVICES PROGRAMS THAT BENEFIT CHILDREN AND ADULTS</u>		
	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	20.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20.
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	135.
	6	Total number of volunteers (estimate if necessary)	6	8,228.
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	60,401,252.	58,645,962.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	47,860.	98,394.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,973,408.	1,478,242.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,422,520.	60,222,598.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,318,256.	44,312,511.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,178,602.	9,936,626.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	346,401.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>5,896,238.</u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,002,429.	5,878,583.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	62,845,688.	60,127,720.
19	Revenue less expenses. Subtract line 18 from line 12	-423,168.	94,878.	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	52,907,572.	50,373,328.
	21	Total liabilities (Part X, line 26)	15,714,723.	14,720,861.
22	Net assets or fund balances. Subtract line 21 from line 20	37,192,849.	35,652,467.	

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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer ▶ <u>WANDA MIZUTOWICZ</u>	Date <u>02/15/2017</u>	
	Type or print name and title <u>CFO</u>		
Paid Preparer Use Only	Print/Type preparer's name <u>KIMBERLY TEMPLE</u>	Preparer's signature <u><i>Kimberly Temple</i></u>	Date <u>02/15/2017</u>
	Firm's name ▶ <u>GRANT THORNTON LLP</u>	Firm's EIN ▶ <u>36-6055558</u>	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ <u>8300 THORN DRIVE, SUITE 300 WICHITA, KS 67226-2708</u>	Phone no. <u>316-265-3231</u>	PTIN <u>P00669176</u>

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 23,693,382. including grants of \$ 19,089,449.) (Revenue \$)

INVESTING IN EXCEPTIONAL LOCAL PROGRAMS THAT PREPARE KIDS TO GRADUATE AND SUCCEED, HELP FAMILIES LEAVE POVERTY PERMANENTLY, AND ENABLE PEOPLE TO LIVE HEALTHY, RESPONSIBLE LIVES. USING A COMPETITIVE GRANTS PROCESS, UNITED WAY VOLUNTEERS IDENTIFY THE BEST INVESTMENTS FOR HELPING PEOPLE IN DALLAS, COLLIN, ROCKWALL AND SOUTHERN DENTON COUNTIES CHANGE THEIR LIVES FOREVER. IN FISCAL YEAR 2015-2016, UNITED WAY OF METROPOLITAN DALLAS, INC. INVESTED IN OVER 160 EXCEPTIONAL EDUCATION, INCOME AND HEALTH PROGRAMS.

4b (Code:) (Expenses \$ 20,619,128. including grants of \$ 20,619,128.) (Revenue \$ 1,458,568.)

DISTRIBUTING DONOR-DESIGNATED CONTRIBUTIONS TO SERVICE PROVIDERS. UNITED WAY OF METROPOLITAN DALLAS, INC. ENABLES DONORS TO DESIGNATE THEIR GIFTS TO OTHER UNITED WAYS OR TO SPECIFIC AGENCIES. IN FISCAL YEAR 2015-2016, UNITED WAY OF METROPOLITAN DALLAS, INC. PROCESSED \$20.6 MILLION IN DESIGNATIONS.

4c (Code:) (Expenses \$ 6,648,643. including grants of \$ 4,603,934.) (Revenue \$)

ATTACHMENT 2

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 50,961,153.

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> (see instructions)?	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> (see instructions).		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>	X	
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

Table with columns for line numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (20), 1b (20), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
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.
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:

WANDA MIZUTOWICZ 1800 N. LAMAR STREET DALLAS, TX 75202 214-978-0000

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. X

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CURTIS M. FITZGERALD DIRECTOR; UWFMD BOARD CHAIR	5.00 5.00	X		X				0.	0.	0.
(2) JOHN STEPHENS BOARD CHAIR	5.00 0.	X		X				0.	0.	0.
(3) DEB GIBBINS TREASURER	5.00 0.	X		X				0.	0.	0.
(4) CLINT MCDONNOUGH AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(5) CHRIS WYSE AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(6) EDWARD G. GALANTE AT-LARGE MEMBER	5.00 5.00	X						0.	0.	0.
(7) ANNE MOTSENBOCKER VICE-CHAIR/CHAIR-ELECT	5.00 0.	X		X				0.	0.	0.
(8) RICK BRIDWELL AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(9) DAVID SEATON CAMPAIGN CHAIR	5.00 0.	X						0.	0.	0.
(10) JASON DOWNING DIRECTOR; UWFMD VICE-CHAIR	2.00 5.00	X		X				0.	0.	0.
(11) MANNY FERNANDEZ AUDIT AND ETHICS CHAIR	2.00 0.	X						0.	0.	0.
(12) CECILY GOOCH AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(13) PETE LERMA AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(14) BILL MORRISON GOVERNANCE CHAIR	5.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) TORRENCE ROBINSON AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(16) MARVIN SWEETIN AT-LARGE MEMBER	1.00 0.	X						0.	0.	0.
(17) DEBRA BRENNAN TAGG AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(18) DEBRA VON STORCH AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(19) KELVIN WALKER AT-LARGE MEMBER	2.00 0.	X						0.	0.	0.
(20) TERRI WEST RESOURCE DEVELOPMENT CHAIR	5.00 0.	X						0.	0.	0.
(21) JENNIFER SAMPSON PRESIDENT AND CEO	32.00 8.00			X				408,237.	0.	60,522.
(22) CINDY PATTILLO CORPORATE SECRETARY TERM 07/15	40.00 0.			X				38,567.	0.	10,597.
(23) WANDA MIZUTOWICZ CFO	38.00 2.00			X				172,278.	0.	18,728.
(24) SUSAN HOFF COO	34.00 6.00			X				299,241.	0.	32,335.
(25) HEATHER WILHITE CORPORATE SECRETARY	40.00 0.			X				0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,860,441.	0.	212,836.
d Total (add lines 1b and 1c)								1,860,441.	0.	212,836.

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 **▶ 12**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
ATTACHMENT 3		

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) KATHRYN SAWERS CHIEF DEVELOPMENT OFFICER	32.00 8.00			X				195,774.	0.	13,775.
(27) AMY CAMP VP, MAJOR & PLANNED GIVING/UFC	40.00 0.					X		149,056.	0.	20,372.
(28) DANA BROWN CHIEF MARKETING OFFICER	40.00 0.					X		181,042.	0.	13,492.
(29) DAN ALANIZ VP, IT & BLDG OPERATIONS	40.00 0.					X		124,111.	0.	14,631.
(30) MARY MASTERS SR VP ANNUAL CAMPAIGN	40.00 0.					X		125,466.	0.	16,259.
(31) JILL STEPHENSON SR VP MAJOR & PLANNED GIVING	40.00 0.					X		166,669.	0.	12,125.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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 ▶ 12

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	211,359.					
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d	2,594,093.					
	e Government grants (contributions)	1e	2,329,884.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	53,510,626.					
	g Noncash contributions included in lines 1a-1f: \$		791,631.					
	h Total. Add lines 1a-1f			58,645,962.				
	Program Service Revenue	2a _____	Business Code					
b _____								
c _____								
d _____								
e _____								
f All other program service revenue								
g Total. Add lines 2a-2f				0.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 4			98,394.			98,394.	
	4 Income from investment of tax-exempt bond proceeds			0.				
	5 Royalties			0.				
	6a Gross rents		(i) Real	(ii) Personal				
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)				0.		
	7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)				0.		
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
		b Less: direct expenses	b					
		c Net income or (loss) from fundraising events				0.		
	9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses		b						
c Net income or (loss) from gaming activities					0.			
10a Gross sales of inventory, less returns and allowances	a							
	b Less: cost of goods sold	b						
	c Net income or (loss) from sales of inventory				0.			
Miscellaneous Revenue		Business Code						
11a DESIGNATION PROCESSING FEES		561000		1,458,568.	1,458,568.			
b OTHER INCOME		561000		19,674.		19,674.		
c _____								
d All other revenue								
e Total. Add lines 11a-11d				1,478,242.				
12 Total revenue. See instructions.				60,222,598.	1,458,568.		118,068.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	44,312,511.	44,312,511.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,280,206.	427,118.	230,402.	622,686.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	6,583,129.	1,890,968.	1,334,686.	3,357,475.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	385,891.	119,825.	81,310.	184,756.
9 Other employee benefits	1,122,029.	348,995.	236,378.	536,656.
10 Payroll taxes	565,371.	171,557.	102,791.	291,023.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	13,619.	657.	6,273.	6,689.
c Accounting	162,415.	40,145.	72,422.	49,848.
d Lobbying	131,799.	131,799.		
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,674,692.	601,455.	825,892.	247,345.
12 Advertising and promotion	795,983.	624,173.	5,289.	166,521.
13 Office expenses	211,696.	122,619.	31,260.	57,817.
14 Information technology	67,001.	41,725.	9,053.	16,223.
15 Royalties	0.			
16 Occupancy	540,682.	401,503.	75,650.	63,529.
17 Travel	137,403.	45,034.	49,712.	42,657.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	854,561.	772,540.	38,941.	43,080.
20 Interest	0.			
21 Payments to affiliates	608,821.	465,007.	50,307.	93,507.
22 Depreciation, depletion, and amortization	449,632.	343,421.	37,153.	69,058.
23 Insurance	80,740.	61,132.	6,229.	13,379.
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 MISCELLANEOUS EXPENSES -----	149,539.	38,969.	76,581.	33,989.
b -----				
c -----				
d -----				
e All other expenses -----				
25 Total functional expenses. Add lines 1 through 24e	60,127,720.	50,961,153.	3,270,329.	5,896,238.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

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	4,939,529.	1	5,867,659.
	2 Savings and temporary cash investments	0.	2	0.
	3 Pledges and grants receivable, net	15,959,267.	3	13,619,888.
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	143,906.	9	184,680.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	11,295,049.		
	b Less: accumulated depreciation	5,789,522.		
		5,786,074.	10c	5,505,527.
	11 Investments - publicly traded securities	13,718,096.	11	13,330,669.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	12,360,700.	15	11,864,905.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	52,907,572.	16	50,373,328.	
Liabilities	17 Accounts payable and accrued expenses	1,703,308.	17	1,845,785.
	18 Grants payable	10,309,740.	18	9,020,531.
	19 Deferred revenue	0.	19	0.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	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	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	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	3,701,675.	25	3,854,545.
	26 Total liabilities. Add lines 17 through 25	15,714,723.	26	14,720,861.
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	6,419,651.	27	6,083,266.
	28 Temporarily restricted net assets	21,119,517.	28	20,657,357.
	29 Permanently restricted net assets	9,653,681.	29	8,911,844.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	37,192,849.	33	35,652,467.
	34 Total liabilities and net assets/fund balances	52,907,572.	34	50,373,328.

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	60,222,598.
2	Total expenses (must equal Part IX, column (A), line 25)	2	60,127,720.
3	Revenue less expenses. Subtract line 2 from line 1	3	94,878.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,192,849.
5	Net unrealized gains (losses) on investments	5	12,907.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,648,167.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	35,652,467.

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	X	

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 METROPOLITAN DALLAS, INC.	Employer identification number 75-6005352
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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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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.")	49,627,649.	51,693,256.	58,989,426.	60,401,252.	58,645,962.	279,357,545.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	49,627,649.	51,693,256.	58,989,426.	60,401,252.	58,645,962.	279,357,545.
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).						42,477,929.
6 Public support. Subtract line 5 from line 4.						236,879,616.

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	49,627,649.	51,693,256.	58,989,426.	60,401,252.	58,645,962.	279,357,545.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	255,517.	166,791.	65,507.	47,860.	98,394.	634,069.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	922,745.	1,135,910.	1,593,177.	1,973,408.	1,478,242.	7,103,482.
11 Total support. Add lines 7 through 10						287,095,096.
12 Gross receipts from related activities, etc. (see instructions)					12	6,971,525.
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	82.51%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	86.18%
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <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?	11 a	
b	A family member of a person described in (a) above?	11 b	
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11 c	

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **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			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
DESIGNATION PROCESSING FEES	922,745.	1,029,199.	1,554,895.	1,861,125.	1,458,568.	6,826,532.
OTHER INCOME		106,711.	38,282.	112,283.	19,674.	276,950.
TOTALS	<u>922,745.</u>	<u>1,135,910.</u>	<u>1,593,177.</u>	<u>1,973,408.</u>	<u>1,478,242.</u>	<u>7,103,482.</u>

Schedule of Contributors

2015

▶ **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.

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number 75-6005352
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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).

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number 75-6005352
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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	_____	\$ 6,971,831.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____	\$ 6,000,512.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____	\$ 3,435,924.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____	\$ 3,112,778.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____	\$ 2,881,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____	\$ 2,009,243.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number 75-6005352
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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
7	_____	\$ 1,672,723.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____	\$ 1,653,279.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____	\$ 1,426,678.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	_____	\$ 1,372,600.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	_____	\$ 1,227,723.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	_____	\$ 1,197,401.	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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 METROPOLITAN DALLAS, INC.

Employer identification number
75-6005352

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 information once. See instructions.) ► \$ _____
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
_____ _____ _____	_____ _____ _____

(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
_____ _____ _____	_____ _____ _____

(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
_____ _____ _____	_____ _____ _____

(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
_____ _____ _____	_____ _____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **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 METROPOLITAN DALLAS, INC.	Employer identification number 75-6005352
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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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2015

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)		131,722.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		77.	
c Total lobbying expenditures (add lines 1a and 1b)		131,799.	
d Other exempt purpose expenditures		50,485,933.	
e Total exempt purpose expenditures (add lines 1c and 1d)		50,617,732.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	
If the amount on line 1e, column (a) or (b) is:		The lobbying nontaxable amount is:	
Not over \$500,000		20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000		\$1,000,000.	
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.	0.
i Subtract line 1f from line 1c. If zero or less, enter -0-		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 checked="" 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	133,866.	102,704.	142,655.	131,799.	511,024.
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	133,866.	101,176.	132,494.	131,722.	499,258.

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d 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).

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

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

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 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); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 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?; 5 Taxable amount of lobbying and political expenditures (see instructions)

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.

Blank lines for providing supplemental information as required by Part IV.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2015

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization: UNITED WAY OF METROPOLITAN DALLAS, INC. Employer identification number: 75-6005352

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions, 3 Aggregate value of grants, 4 Aggregate value at end of year, 5-6 Did the organization inform donors and grantees...

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2-4 Conservation contribution details, 5-7 Monitoring and expenses, 8-9 Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a-1b Reporting requirements for art collections, 2 Reporting requirements for financial gain.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2015

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	32,928,328.	28,095,577.	24,580,203.	20,948,693.	20,343,747.
b Contributions	3,795,736.	6,046,025.	774,060.	2,187,806.	543,205.
c Net investment earnings, gains, and losses	567,397.	965,142.	4,627,634.	2,919,639.	488,552.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,487,395.	1,009,003.	992,970.	845,748.	185,172.
f Administrative expenses	1,145,836.	1,169,413.	893,350.	630,187.	241,639.
g End of year balance	34,658,230.	32,928,328.	28,095,577.	24,580,203.	20,948,693.

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

- a** Board designated or quasi-endowment 59.5800 %
- b** Permanent endowment 34.9900 %
- c** Temporarily restricted endowment 5.4300 %

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)		
3a(ii)	X	
3b	X	

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		211,259.		211,259.
b Buildings		8,811,865.	4,075,772.	4,736,093.
c Leasehold improvements		389,002.	129,536.	259,466.
d Equipment		1,148,958.	962,958.	186,000.
e Other		733,965.	621,256.	112,709.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				5,505,527.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUSTS	8,911,845.
(2) DUE FROM UNITED WAY/FOUNDATION	2,846,666.
(3) OTHER ASSETS	106,394.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	11,864,905.

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) DONOR DESIGNATIONS	3,854,545.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	3,854,545.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue calculated as 60,222,598.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses calculated as 60,127,720.

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.

SEE PAGE 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

INTENDED USE OF ENDOWMENT FUNDS

THE ENDOWMENT FUNDS ARE ESTABLISHED FOR THE EXCLUSIVE PURPOSE OF THE DONORS AND TO SUPPORT PROGRAM INITIATIVES OF THE UNITED WAY OF METROPOLITAN DALLAS, INC.

SCHEDULE D, PART X, LINE 2

FIN 48 (ASC 470) FOOTNOTE

BOTH THE UNITED WAY AND THE FOUNDATION ARE EXEMPT FROM FEDERAL INCOME TAXATION UNDER INTERNAL REVENUE CODE SECTION 501(C)(3). HOWEVER, INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE EXEMPT PURPOSE OF THE UNITED WAY AND THE FOUNDATION IS SUBJECT TO TAX. NEITHER THE UNITED WAY NOR THE FOUNDATION HAD UNRELATED BUSINESS INCOME DURING 2016 OR 2015.

CONTRIBUTIONS TO THE UNITED WAY AND THE FOUNDATION ARE TAX-DEDUCTIBLE WITHIN THE LIMITATIONS PRESCRIBED BY LAW. NO TAX ACCRUAL FOR UNCERTAIN TAX POSITIONS WAS RECORDED AS MANAGEMENT BELIEVES THERE ARE NO UNCERTAIN TAX POSITIONS FOR THE UNITED WAY AND THE FOUNDATION.

SCHEDULE D, PART XI, LINE 2D

RECONCILIATION OF REVENUE

DESIGNATIONS TO AGENCIES	\$(21,525,456)
LESS: CHANGES IN TRUSTS	\$ 741,837

TOTAL REVENUE INCLUDED IN BOOKS AND NOT ON RETURN	\$(22,267,293)
	=====

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XII, LINE 2D

RECONCILIATION OF EXPENSES

DESIGNATIONS TO AGENCIES \$ (20,619,126)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

Part I General Information on Grants and Assistance

- 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
- 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
(1) ADAPTIVE TRAINING FOUNDATION, INC. 13601 PRESTON RD., E230 DALLAS, TX 75240	471872676	501(C)(3)	70,000.				PROGRAM OPS COST
(2) ADVANCENET LABS P.O. BOX 368 GRAPEVINE, TX 76099	465492631	501(C)(3)	78,200.				PROGRAM OPS COST
(3) AFTER-SCHOOL ALL-STARS N. TEXAS 2250 LAKESIDE BLVD. RICHARDSON, TX 75082	954441208	501(C)(3)	55,626.				PROGRAM OPS COST
(4) AIDS ARMS, INC. 351 W. JEFFERSON BLVD. DALLAS, TX 75208	752306145	501(C)(3)	277,500.				PROGRAM OPS COST
(5) AKOLA PROJECT, INC. 2646 MAIN ST., STE 110 DALLAS, TX 75226	204560040	501(C)(3)	45,000.				PROGRAM OPS COST
(6) AMERICAN RED CROSS - DALLAS AREA CHAPTER 4800 HARRY HINES BLVD. DALLAS, TX 75235	530196605	501(C)(3)	112,500.				PROGRAM OPS COST
(7) AMY'S FRIENDS DBA NEW FRIENDS NEW LIFE P.O. BOX 192378 DALLAS, TX 75219	752820473	501(C)(3)	64,407.				PROGRAM OPS COST
(8) ASSISTANCE CENTER OF COLLIN COUNTY 900 E. 18TH ST. PLANO, TX 75074	751550604	501(C)(3)	22,727.				PROGRAM OPS COST
(9) ASSOC. OF PERSONS AFFECTED BY ADDICTION 3116 MARTIN LUTHER KING BLVD.	752283401	501(C)(3)	25,000.				PROGRAM OPS COST
(10) AVANCE - DALLAS 2060 SINGLETON BLVD. DALLAS, TX 75212	752699260	501(C)(3)	695,425.				PROGRAM OPS COST
(11) BAYLOR HEALTH CARE SYSTEM FOUNDATION 3600 GASTON AVE. DALLAS, TX 75246	751606705	501(C)(3)	115,597.				PROGRAM OPS COST
(12) BAYLOR UNIVERSITY- TEXAS HUNGER INITIATIVE 1 BEAR PLACE, STE 97042 WACO, TX 76798	741159753	501(C)(3)	25,000.				PROGRAM OPS COST

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) BIG BROTHERS BIG SISTERS LONE STAR 450 E. JOHN CARPENTER FWY. IRVING, TX 75062	750800632	501(C)(3)	179,000.				PROGRAM OPS COST
(2) BIG THOUGHT 1409 S. LAMAR ST. 1015 DALLAS, TX 75215	752170035	501(C)(3)	151,316.				PROGRAM OPS COST
(3) BONTON FARMS 2075 W. COMMERCE DALLAS, TX 75208	752596111	501(C)(3)	29,000.				PROGRAM OPS COST
(4) BOY SCOUTS OF AMERICA, CIRCLE TEN COUNCIL 8605 HARRY HINES BLVD. DALLAS, TX 75235	750800615	501(C)(3)	275,000.				PROGRAM OPS COST
(5) BOYS & GIRLS CLUBS OF COLLIN COUNTY 701 S. CHURCH ST. MCKINNEY, TX 75069	751296869	501(C)(3)	67,500.				PROGRAM OPS COST
(6) BOYS & GIRLS CLUBS OF GREATER DALLAS P.O. BOX 140189 DALLAS, TX 75214	751152657	501(C)(3)	210,000.				PROGRAM OPS COST
(7) CAFE MOMENTUM P.O. BOX 190309 DALLAS, TX 75219	320384561	501(C)(3)	82,000.				PROGRAM OPS COST
(8) CALLIER CENTER FOR COMMUNICATION DISORDERS 1966 INWOOD RD. DALLAS, TX 75235	751305566	501(C)(3)	42,500.				PROGRAM OPS COST
(9) CASA OF COLLIN COUNTY 101 E. DAVIS ST. MCKINNEY, TX 75069	752391961	501(C)(3)	23,282.				PROGRAM OPS COST
(10) CASA OF DENTON COUNTY P.O. BOX 2885 DENTON, TX 76202	752417472	501(C)(3)	25,000.				PROGRAM OPS COST
(11) CATHOLIC CHARITIES OF DALLAS, INC. 9461 LBJ FREEWAY DALLAS, TX 75243	752745221	501(C)(3)	695,675.				PROGRAM OPS COST
(12) CENTER FOR PUBLIC POLICY PRIORITIES 7020 EASY WIND DR. 200 AUSTIN, TX 78752	742898197	501(C)(3)	7,950.				PROGRAM OPS COST

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**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.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) CHILD & FAMILY GUIDANCE CENTERS 8915 HARRY HINES BLVD. DALLAS, TX 75235	750800630	501(C)(3)	245,000.				PROGRAM OPS COST
(2) CHILDCAREGROUP 8585 N. STEMMONS FWY. DALLAS, TX 75247	750800634	501(C)(3)	1,279,851.				PROGRAM OPS COST
(3) CHILDREN FIRST COUNSELING CENTER P.O. BOX 532147 GRAND PRAIRIE, TX 75053	752100237	501(C)(3)	22,500.				PROGRAM OPS COST
(4) CHILDREN'S ADVOCACY CTR. FOR DENTON COUNTY 1854 CAIN DR. LEWISVILLE, TX 75077	752559765	501(C)(3)	37,500.				PROGRAM OPS COST
(5) CHILDREN'S ADVOCACY CENTER OF COLLIN COUNTY 2205 LOS RIOS BLVD. PLANO, TX 75074	752389095	501(C)(3)	97,540.				PROGRAM OPS COST
(6) CHILDREN'S MEDICAL CENTER DALLAS 1935 MEDICAL DISTRICT DR. DALLAS, TX 75235	750800628	501(C)(3)	722,896.				PROGRAM OPS COST
(7) CHRISTIAN COMMUNITY ACTION 200 S. MILL ST. LEWISVILLE, TX 75057	237319371	501(C)(3)	73,750.				PROGRAM OPS COST
(8) CHRISTIAN TRANSFORMATION FOUNDATION 2215 CANADA DR. DALLAS, TX 75212	264441043	501(C)(3)	22,500.				PROGRAM OPS COST
(9) CITIZENS DEVELOPMENT CENTER 8800 AMBASSADOR ROW DALLAS, TX 75247	751008422	501(C)(3)	122,500.				PROGRAM OPS COST
(10) CITY OF GARLAND 200 N. FIFTH ST. GARLAND, TX 75040	756000534	N/A	9,605.				PROGRAM OPS COST
(11) CITY YEAR 287 COLUMBUS AVE. BOSTON, MA 02116	222882549	501(C)(3)	100,000.				PROGRAM OPS COST
(12) CITY SQUARE 511 N. AKARD DALLAS, TX 75201	752332948	501(C)(3)	385,847.				PROGRAM OPS COST

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

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) COLLIN COUNTY COMMITTEE ON AGING 600 N. TENNESSEE ST MCKINNEY, TX 75069	751544507	501(C)(3)	20,000.				PROGRAM OPS COST
(2) COMMIT!2DALLAS 5500 CARUTH HAVEN LANE DALLAS, TX 75225	750964565	501(C)(3)	90,000.				PROGRAM OPS COST
(3) COMMUNITIES IN SCHOOLS OF NORTH TEXAS P.O. BOX 295543 LEWISVILLE, TX 75029	752496426	501(C)(3)	80,000.				PROGRAM OPS COST
(4) COMMUNITIES IN SCHOOLS OF THE DALLAS REGION 8700 N. STEMMONS FWY., 125 DALLAS, TX 75247	752044117	501(C)(3)	75,000.				PROGRAM OPS COST
(5) COMMUNITY DENTAL CARE 1420 W. MOCKINGBIRD LN. DALLAS, TX 75247	751823660	501(C)(3)	207,885.				PROGRAM OPS COST
(6) CONCORD MISSIONARY BAPTIST CHURCH 608 PASTOR BAILY DR. DALLAS, TX 75237	751523441	501(C)(3)	12,500.				PROGRAM OPS COST
(7) DALLAS AFTERSCHOOL NETWORK 2902 SWISS AVE. DALLAS, TX 75204	760838983	501(C)(3)	350,000.				PROGRAM OPS COST
(8) DALLAS ARBORETUM AND BOTANICAL SOCIETY 8617 GARLAND AVE. DALLAS, TX 75218	237375815	501(C)(3)	136,403.				PROGRAM OPS COST
(9) DALLAS AREA HABITAT FOR HUMANITY 2800 N. HAMPTON RD. DALLAS, TX 75212	752097161	501(C)(3)	100,000.				PROGRAM OPS COST
(10) DALLAS CENTER, INC. 8550 CADENZA LANE DALLAS, TX 75228	751083102	501(C)(3)	69,867.				PROGRAM OPS COST
(11) DALLAS CHALLENGE 7777 FOREST LANE, C-410 DALLAS, TX 75230	751964233	501(C)(3)	53,525.				PROGRAM OPS COST
(12) DALLAS CHILDREN'S ADVOCACY CENTER 3611 SWISS AVE. DALLAS, TX 75204	752303404	501(C)(3)	244,647.				PROGRAM OPS COST

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) DALLAS COUNTY COMMUNITY COLLEGE DISTRICT 1601 S. LAMAR ST. DALLAS, TX 75208	237326612	501(C)(3)	113,500.				PROGRAM OPS COST
(2) DALLAS ENTREPRENEUR CENTER (DEC) 311 N. MARKET ST. DALLAS, TX 75202	462835130	501(C)(3)	100,000.				PROGRAM OPS COST
(3) DALLAS FURNITURE BANK P.O. BOX 815788 DALLAS, TX 75381	481279673	501(C)(3)	25,000.				PROGRAM OPS COST
(4) DALLAS INDEPENDENT SCHOOL DISTRICT 3700 ROSS AVE., BOX 108 DALLAS, TX 75204	205533398	501(C)(3)	333,475.				PROGRAM OPS COST
(5) DALLAS LIGHTHOUSE FOR THE BLIND 4306 CAPITAL AVE. DALLAS, TX 75204	750968301	501(C)(3)	65,000.				PROGRAM OPS COST
(6) DALLAS METHODIST HOSPITALS FOUNDATION 1411 N. BECKLEY AVE. DALLAS, TX 75203	751548343	501(C)(3)	10,000.				PROGRAM OPS COST
(7) DALLAS MORNING NEWS CHARITIES P.O. BOX 655237 DALLAS, TX 75265	752128160	501(C)(3)	75,000.				PROGRAM OPS COST
(8) DALLAS SERVICES 4242 OFFICE PKWY. DALLAS, TX 75204	750958408	501(C)(3)	60,000.				PROGRAM OPS COST
(9) DENTON COUNTY FRIENDS OF THE FAMILY 1400 CRESCENT DENTON, TX 76201	751734175	501(C)(3)	37,500.				PROGRAM OPS COST
(10) EAT THE YARD 2744 WOODMERE DR. DALLAS, TX 75233	462110379	N/A	10,000.				PROGRAM OPS COST
(11) EDUCATION IS FREEDOM FOUNDATION 2711 N. HASKELL AVE. DALLAS, TX 75204	043643313	501(C)(3)	62,500.				PROGRAM OPS COST
(12) EDUCATIONAL FIRST STEPS 2804 SWISS AVE. DALLAS, TX 75204	752334053	501(C)(3)	30,000.				PROGRAM OPS COST

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**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.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) EQUAL HEART 4848 LEMMON AVE., #513 DALLAS, TX 75219	462846816	501(C)(3)	96,000.				PROGRAM OPS COST
(2) FAMILY CARE CONNECTION 6969 PASTOR BAILEY DR. DALLAS, TX 75237	201211618	501(C)(3)	27,601.				PROGRAM OPS COST
(3) FAMILY COMPASS 4210 JUNIUS ST. DALLAS, TX 75246	752400158	501(C)(3)	627,655.				PROGRAM OPS COST
(4) FIRST BOOK 1319 F ST. N.W., 1000 WASHINGTON, DC 20004	521779606	501(C)(3)	25,000.				PROGRAM OPS COST
(5) DOLLARS FOR COLLEGE I/C/O FNB P.O. BOX 937 KILLEEN, TX 76540	742681037	N/A	5,250.				PROGRAM OPS COST
(6) FOUNDATION COMMUNITIES 3036 S. FIRST ST. STE 200 DALLAS, TX 78704	742563260	501(C)(3)	167,000.				PROGRAM OPS COST
(7) FRONTIERS OF FLIGHT MUSEUM 6911 LEMMON AVE. DALLAS, TX 75209	752244531	501(C)(3)	25,000.				PROGRAM OPS COST
(8) GALAXY COUNSELING CENTER 1025 S. JUPITER RD. GARLAND, TX 75042	237110664	501(C)(3)	15,000.				PROGRAM OPS COST
(9) GENESIS WOMEN'S SHELTER & SUPPORT 4411 LEMMON AVE. DALLAS, TX 75219	751881365	501(C)(3)	117,500.				PROGRAM OPS COST
(10) GIRL SCOUTS OF N.E. TEXAS 600 SUMMERSIDE DR. DALLAS, TX 75252	751101571	501(C)(3)	225,000.				PROGRAM OPS COST
(11) GIRLS INCORPORATED OF METROPOLITAN DALLAS 2040 EMPIRE CENTRAL DALLAS, TX 75235	751305705	501(C)(3)	307,197.				PROGRAM OPS COST
(12) GOODWILL INDUSTRIES OF DALLAS 3020 N.W. MORELAND RD. DALLAS, TX 75212	750800649	501(C)(3)	804,787.				PROGRAM OPS COST

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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- 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
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(1) H.I.S. BRIDGEBUILDERS 2075 W. COMMERCE DALLAS, TX 75208	752596111	501(C)(3)	51,500.				PROGRAM OPS COST
(2) HABITAT FOR HUMANITY OF GREATER GARLAND 1110 MAIN ST. GARLAND, TX 75040	752499430	501(C)(3)	25,400.				PROGRAM OPS COST
(3) HEALTH SERVICES OF N. TEXAS 4401 N. I-35E, STE 312 DENTON, TX 76207	752252866	501(C)(3)	35,000.				PROGRAM OPS COST
(4) HOPE CLINIC OF GARLAND 808 W. AVE. A GARLAND, TX 75040	752960314	501(C)(3)	37,500.				PROGRAM OPS COST
(5) HOPE COTTAGE PREGNANCY AND ADOPTION CENTER 4209 MCKINNEY AVE. DALLAS, TX 75205	750800652	501(C)(3)	24,450.				PROGRAM OPS COST
(6) HOPE'S DOOR 820 F AVE., STE 100 PLANO, TX 75074	752038796	501(C)(3)	35,000.				PROGRAM OPS COST
(7) HOUSING CRISIS CENTER 4210 JUNIUS ST. DALLAS, TX 75246	751633304	501(C)(3)	40,000.				PROGRAM OPS COST
(8) INTERFAITH HOUSING COALITION P.O. BOX 720206 DALLAS, TX 75372	752028254	501(C)(3)	191,500.				PROGRAM OPS COST
(9) IRVING CARES 440 S. NURSERY RD. IRVING, TX 75017	751436937	501(C)(3)	87,500.				PROGRAM OPS COST
(10) JEWISH FAMILY SERVICE OF DALLAS 5402 ARAPAHO RD. DALLAS, TX 75248	751992728	501(C)(3)	560,776.				PROGRAM OPS COST
(11) JUBILEE PARK & COMMUNITY CENTER CORPORATION 907 BANK ST. DALLAS, TX 75223	752726296	501(C)(3)	102,500.				PROGRAM OPS COST
(12) JUNIOR ACHIEVEMENT OF DALLAS 1201 EXECUTIVE DR. W. RICHARDSON, TX 75081	750881589	501(C)(3)	52,500.				PROGRAM OPS COST

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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(1) KIPP DALLAS FORT WORTH, INC. 3200 S. LANCASTER RD STE, 230-A	820578155	501(C)(3)	92,365.				PROGRAM OPS COST
(2) LAUNCHABILITY 4350 SIGMA RD. DALLAS, TX 75244	751189353	501(C)(3)	133,518.				PROGRAM OPS COST
(3) LIFT (LITERACY INSTRUCTION FOR TEXAS) 1610 S. MALCOLM X BLVD. 320	751095223	501(C)(3)	395,860.				PROGRAM OPS COST
(4) LIFTFUND 2060 SINGLETON BLVD., STE 107	742712770	501(C)(3)	55,907.				PROGRAM OPS COST
(5) LOS BARRIOS UNIDOS COMMUNITY CLINIC 809 SINGLETON BLVD. DALLAS, TX 75212	751378664	501(C)(3)	90,000.				PROGRAM OPS COST
(6) LUMIN EDUCATION 924 WAYNE ST. DALLAS, TX 75223	751612054	501(C)(3)	362,647.				PROGRAM OPS COST
(7) MARRIOTT FDN. FOR PEOPLE WITH DISABILITIES 1201 MAIN ST. 2450 DALLAS, TX 75202	521655740	501(C)(3)	44,543.				PROGRAM OPS COST
(8) MAURICE BARNETT GERIATRIC WELLNESS CENTER 401 W. 16TH ST., STE 600 PLANO, TX 75075	751839305	501(C)(3)	7,500.				PROGRAM OPS COST
(9) MERCY STREET INC. 3801 HOLYSTONE ST. DALLAS, TX 75212	450536344	501(C)(3)	105,000.				PROGRAM OPS COST
(10) MESQUITE SOCIAL SERVICES 1035 MILITARY PARKWAY MESQUITE, TX 75149	751108455	501(C)(3)	20,000.				PROGRAM OPS COST
(11) METRO DALLAS HOMELESS ALLIANCE 2816 SWISS AVE. DALLAS, TX 75204	752461679	501(C)(3)	61,469.				PROGRAM OPS COST
(12) METROCREST SOCIAL SERVICES 13801 HUTTON DR. FARMERS BRANCH, TX 75234	751548334	501(C)(3)	137,500.				PROGRAM OPS COST

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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(1) MI ESCUELITA PRESCHOOLS 4231 MAPLE AVE. DALLAS, TX 75204	751728505	501(C)(3)	374,066.				PROGRAM OPS COST
(2) MOMENTIOUS INSTITUTE 106 E. 10TH ST. DALLAS, TX 75203	751855620	501(C)(3)	25,000.				PROGRAM OPS COST
(3) MOSAIC FAMILY SERVICES 4144 N. CENTRAL EXPWY. DALLAS, TX 75204	752484565	501(C)(3)	342,306.				PROGRAM OPS COST
(4) MY POSSIBILITIES 1301 CUSTER RD. PLANO, TX 75075	261509133	501(C)(3)	45,750.				PROGRAM OPS COST
(5) NATIONAL AUDUBON SOCIETY 6500 GREAT TRINITY FOREST DALLAS, TX 75217	131624102	501(C)(3)	69,404.				PROGRAM OPS COST
(6) NATIONAL COUNCIL OF THE U.S. SOCIETY 58 PROGRESS PKWY ST. LOUIS, MO 63043	135562362	501(C)(3)	31,500.				PROGRAM OPS COST
(7) NEXUS RECOVERY CENTER 8733 LAPRADA DR. DALLAS, TX 75228	237169388	501(C)(3)	390,852.				PROGRAM OPS COST
(8) NHP FOUNDATION 1090 VERMONT AVE. WASHINGTON, DC 20005	521636004	501(C)(3)	8,750.				PROGRAM OPS COST
(9) N. DALLAS SHARED MINISTRIES 2875 MERRELL RD. DALLAS, TX 75229	751908563	501(C)(3)	35,000.				PROGRAM OPS COST
(10) N. TEXAS FOOD BANK 4500 S. COCKRELL HILL RD. DALLAS, TX 75236	751785357	501(C)(3)	15,200.				PROGRAM OPS COST
(11) NPOWERNY, INC. 3 METROTECH CENTER BROOKLYN, NY 11201	134145441	501(C)(3)	128,000.				PROGRAM OPS COST
(12) OPEN ARMS INC. DBA BRYAN'S HOUSE 608 N. ELM ST. ARLINGTON, TX 76011	752217559	501(C)(3)	74,500.				PROGRAM OPS COST

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Name of the organization

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Employer identification number

75-6005352

Part I General Information on Grants and Assistance

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(1) PARKLAND CENTER FOR CLINICAL INNOVATION 8435 STEMMONS FWY. DALLAS, TX 75247	455363543	501(C)(3)	17,000.				PROGRAM OPS COST
(2) PARKLAND FOUNDATION 2777 N. STEMMONS FREEWAY DALLAS, TX 75207	752089180	501(C)(3)	125,313.				PROGRAM OPS COST
(3) PEDIPLACE 502 S. OLD ORCHARD LN. LEWISVILLE, TX 75067	752512752	501(C)(3)	414,011.				PROGRAM OPS COST
(4) PER SCHOLAS 1610 S. MALCOLM X BLVD. DALLAS, TX 75226	043252955	501(C)(3)	162,500.				PROGRAM OPS COST
(5) PEROT MUSEUM OF NATURE AND SCIENCE P.O. BOX 151469 DALLAS, TX 75315	756067569	501(C)(3)	136,053.				PROGRAM OPS COST
(6) PLANO ISD EDUCATION FOUNDATION 2700 W. 15TH ST. PLANO, TX 75075	752481906	501(C)(3)	71,161.				PROGRAM OPS COST
(7) PRISON ENTREPRENEURSHIP PROGRAM 4140 DIRECTORS ROW, STE B HOUSTON, TX 77092	201384253	501(C)(3)	251,416.				PROGRAM OPS COST
(8) PROJECT TRANSFORMATION 547 E. JEFFERSON BLVD. DALLAS, TX 75203	752930405	N/A	32,500.				PROGRAM OPS COST
(9) RAINBOW DAYS 8150 N. CENTRAL EXPWY. DALLAS, TX 75206	751844908	501(C)(3)	113,852.				PROGRAM OPS COST
(10) READERS 2 LEADERS 2223 SINGLETON BLVD. DALLAS, TX 75212	900641325	501(C)(3)	55,625.				PROGRAM OPS COST
(11) READING PARTNERS DALLAS 2910 SWISS AVE. DALLAS, TX 75204	770568469	501(C)(3)	90,000.				PROGRAM OPS COST
(12) REAL SCHOOL GARDENS 503 BRYAN AVE. FORT WORTH, TX 76104	205946552	501(C)(3)	142,500.				PROGRAM OPS COST

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Schedule I (Form 990) (2015)

**SCHEDULE I
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**Grants and Other Assistance to Organizations,
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(1) REASONING MIND, INC. 8150 N. CENTRAL EXPWY. DALLAS, TX 75206	760662298	501(C)(3)	166,321.				PROGRAM OPS COST
(2) RECONCILIATION ACADEMY, INC. 4301 BRYAN ST., STE 120 DALLAS, TX 75204	752733436	501(C)(3)	35,000.				PROGRAM OPS COST
(3) RESOURCE CENTER OF DALLAS, INC. 2701 REAGAN ST. DALLAS, TX 75219	751892059	501(C)(3)	210,000.				PROGRAM OPS COST
(4) ROCKWALL COUNTY HELPING HANDS, INC. 950 WILLIAMS ST. ROCKWALL, TX 75087	752402276	501(C)(3)	122,500.				PROGRAM OPS COST
(5) THE SAMARITAN INN, INC. 1710 N. MCDONALD ST. MCKINNEY, TX 75071	751984285	501(C)(3)	34,487.				PROGRAM OPS COST
(6) SHARING LIFE COMMUNITY OUTREACH 3544 E. EMPORIUM CIRCLE MESQUITE, TX 75150	752831756	501(C)(3)	7,000.				PROGRAM OPS COST
(7) SOCIETY OF ST. VINCENT DE PAUL 3826 GILBERT DALLAS, TX 75219	751630370	501(C)(3)	40,000.				PROGRAM OPS COST
(8) SOUTHWESTERN METHODIST UNIVERSITY P.O. BOX 750302 DALLAS, TX 75275	750800689	501(C)(3)	67,500.				PROGRAM OPS COST
(9) SOUTHWESTERN DIABETIC FOUNDATION P.O. BOX 918 GAINESVILLE, TX 76241	756002547	501(C)(3)	24,000.				PROGRAM OPS COST
(10) THE TEXAS ASSN. FOR THE PROTECTION OF CHILD 1341 MOCKINGBIRD LANE DALLAS, TX 75247	461332547	501(C)(3)	61,744.				PROGRAM OPS COST
(11) TEXAS MUSLIM WOMEN'S FOUNDATION 2300 COIT RD., STE 350 PLANO, TX 75075	203060929	501(C)(3)	45,000.				PROGRAM OPS COST
(12) THE COMMUNITY COUNCIL OF GREATER DALLAS 1349 EMPIRE CENTRAL, STE 400	750800631	501(C)(3)	70,000.				PROGRAM OPS COST

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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
(1) THE CONCILIO 400 S. ZANG BLVD. DALLAS, TX 75208	751770140	501(C)(3)	417,499.				PROGRAM OPS COST
(2) THE COOPER INSTITUTE 12330 PRESTON RD. DALLAS, TX 75230	237075529	501(C)(3)	502,132.				PROGRAM OPS COST
(3) THE DALLAS FOUNDATION 3963 MAPLE AVE., STE 390 DALLAS, TX 75219	752461679	501(C)(3)	170,000.				PROGRAM OPS COST
(4) THE FAMILY PLACE 4300 MACARTHUR AVE. DALLAS, TX 75209	751590896	501(C)(3)	680,140.				PROGRAM OPS COST
(5) THE PRINCETON REVIEW FOUNDATION 10830 N. CENTRAL EXPWY. 252	133429168	501(C)(3)	50,000.				PROGRAM OPS COST
(6) THE SALVATION ARMY CARR P COLLINS CENTER 8787 N. STEMMONS FWY., 800 DALLAS, TX 75247	580660607	501(C)(3)	272,500.				PROGRAM OPS COST
(7) THE SALVATION ARMY DFW METROPLEX COMMAND 8787 N. STEMMONS FWY., 800 DALLAS, TX 75247	580660607	501(C)(3)	354,000.				PROGRAM OPS COST
(8) THE SENIOR SOURCE 3910 HARRY HINES BLVD. DALLAS, TX 75219	751085555	501(C)(3)	297,666.				PROGRAM OPS COST
(9) THE TURNING POINT 3325 SILVERSTONE PLANO, TX 75023	752065785	501(C)(3)	58,500.				PROGRAM OPS COST
(10) THE VISITING NURSE ASSOCIATION OF TEXAS 1600 VICEROY DR. DALLAS, TX 75235	750800692	501(C)(3)	170,000.				PROGRAM OPS COST
(11) THE WARREN CENTER 320 CUSTER RD. RICHARDSON, TX 75080	751282040	501(C)(3)	22,000.				PROGRAM OPS COST
(12) TRANSFORMANCE 8737 KING GEORGE DR., STE 200	751437638	501(C)(3)	108,402.				PROGRAM OPS COST

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

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

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

**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.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) TRINITY RIVER MISSION, INC. 2060 SINGLETON BLVD. DALLAS, TX 75212	756055203	501(C)(3)	260,454.				PROGRAM OPS COST
(2) TURTLE CREEK MANOR INC. 2820 SWISS AVE. DALLAS, TX 75204	751282276	501(C)(3)	60,000.				PROGRAM OPS COST
(3) UPLIFT EDUCATION 606 E. ROYAL LANE DALLAS, TX 75039	752659683	501(C)(3)	300,000.				PROGRAM OPS COST
(4) VICKERY MEADOW LEARNING CENTER 6329 RIDGECREST RD. DALLAS, TX 75231	752708992	501(C)(3)	144,500.				PROGRAM OPS COST
(5) VOGEL ALCOVE 7557 RAMBLER RD. DALLAS, TX 75231	752133827	501(C)(3)	94,000.				PROGRAM OPS COST
(6) WE TEACH SCIENCE FOUNDATION 9319 LBJ FREEWAY, STE 102 DALLAS, TX 75243	263861047	501(C)(3)	25,000.				PROGRAM OPS COST
(7) WILKINSON CENTER 4144 N. CENTRAL EXPWY. DALLAS, TX 75204	752712117	501(C)(3)	160,249.				PROGRAM OPS COST
(8) WINGS (FORMERLY YWCA OF METRO. DALLAS) 4144 N. CENTRAL EXPWY. DALLAS, TX 75204	750800699	501(C)(3)	934,583.				PROGRAM OPS COST
(9) YMCA OF METROPOLITAN DALLAS 1621 W. WALNUT HILL IRVING, TX 75038	750800696	501(C)(3)	284,165.				PROGRAM OPS COST
(10) YOUNG WOMEN'S PREPARATORY NETWORK 2804 SWISS AVE. DALLAS, TX 75204	470902114	501(C)(3)	92,364.				PROGRAM OPS COST
(11) YOUTH WITH FACES 6333 E. MOCKINGBIRD DALLAS, TX 75214	300018778	501(C)(3)	37,500.				PROGRAM OPS COST
(12) AIDS ARMS, INC. 351 W. JEFFERSON BLVD. DALLAS, TX 75208	752306145	501(C)(3)	36,351.				DONOR DESIGNATIONS

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OMB No. 1545-0047

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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
(1) ALBEMARLE AREA UNITED WAY P.O. BOX 293 ELIZABETH CITY, NC 27907	237123601	501(C)(3)	14,326.				DONOR DESIGNATIONS
(2) ALLEN COMMUNITY OUTREACH 801 E. MAIN ST. ALLEN, TX 75002	751986190	501(C)(3)	27,804.				DONOR DESIGNATIONS
(3) ALVERNIA UNIVERSITY 400 SAINT BERNARDINE ST. READING, PA 19607	231522643	501(C)(3)	18,700.				DONOR DESIGNATIONS
(4) ALZHEIMER'S ASSOCIATION - GREATER DALLAS 4144 N. CENTRAL EXPRESSWAY DALLAS, TX 75204	752041194	501(C)(3)	45,572.				DONOR DESIGNATIONS
(5) AMERICAN CANCER SOCIETY - DALLAS METRO MKT. 8900 JOHN CARPENTER FWY. DALLAS, TX 75247	741185665	501(C)(3)	64,861.				DONOR DESIGNATIONS
(6) AMERICAN CANCER SOCIETY - SAN FRANCISCO 601 MONTGOMERY ST. SAN FRANCISCO, CA 94111	131788491	501(C)(3)	29,043.				DONOR DESIGNATIONS
(7) AMERICAN HEART ASSN.-DALLAS/S.W. AFFILIATE 8200 BROOKRIVER DR. N-100 DALLAS, TX 75247	135613797	501(C)(3)	5,105.				DONOR DESIGNATIONS
(8) AMERICAN HEART ASSN. - SHAWNEE MISSION, KS 6800 W 93RD ST. SHAWNEE MISSION, KS 66212	135613797	501(C)(3)	16,894.				DONOR DESIGNATIONS
(9) AMERICAN MORGAN HORSE INSTITUTE INC. P.O. BOX 960 SHELBURNE, VT 05482	042731219	501(C)(3)	5,953.				DONOR DESIGNATIONS
(10) AMERICAN RED CROSS - DALLAS AREA CHAPTER 4800 HARRY HINES BLVD. DALLAS, TX 75235	530196605	501(C)(3)	111,541.				DONOR DESIGNATIONS
(11) AMY'S FRIENDS DBA NEW FRIENDS NEW LIFE P.O. BOX 192378 DALLAS, TX 75219	752820473	501(C)(3)	10,607.				DONOR DESIGNATIONS
(12) ARTHRITIS FOUNDATION - NORTH TEXAS 4300 MACARTHUR AVE. DALLAS, TX 75209	581341679	501(C)(3)	7,371.				DONOR DESIGNATIONS

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(1) AVANCE - DALLAS 2060 SINGLETON BLVD. DALLAS, TX 75212	752699260	501(C)(3)	13,465.				DONOR DESIGNATIONS
(2) BAYLOR HEALTH CARE SYSTEM FOUNDATION 3600 GASTON AVE. DALLAS, TX 75246	751606705	501(C)(3)	32,236.				DONOR DESIGNATIONS
(3) BIG BROTHERS BIG SISTERS LONE STAR 450 E. JOHN CARPENTER FWY. IRVING, TX 75062	750800632	501(C)(3)	70,739.				DONOR DESIGNATIONS
(4) BIG THOUGHT 1409 S. LAMAR ST. DALLAS, TX 75215	752170035	501(C)(3)	5,401.				DONOR DESIGNATIONS
(5) BOY SCOUTS OF AMERICA, CIRCLE TEN COUNCIL 8605 HARRY HINES BLVD. DALLAS, TX 75235	750800615	501(C)(3)	144,052.				DONOR DESIGNATIONS
(6) BOY SCOUTS OF AMERICA, LONGHORN COUNCIL P.O. BOX 54190 HURST, TX 76054	741157377	501(C)(3)	17,891.				DONOR DESIGNATIONS
(7) BOYS & GIRLS CLUB OF ARLINGTON 608 N. ELM ST. ARLINGTON, TX 76011	751046644	501(C)(3)	8,481.				DONOR DESIGNATIONS
(8) BOYS & GIRLS CLUB OF COLLIN COUNTY 701 S. CHURCH ST. MCKINNEY, TX 75069	751296869	501(C)(3)	14,767.				DONOR DESIGNATIONS
(9) BOYS & GIRLS CLUB OF GREATER DALLAS P.O. BOX 140189 DALLAS, TX 75214	751152657	501(C)(3)	86,216.				DONOR DESIGNATIONS
(10) BRYAN'S HOUSE P.O. BOX 35868 DALLAS, TX 75235	752801818	501(C)(3)	6,243.				DONOR DESIGNATIONS
(11) CALLIER CENTER FOR COMMUNICATION DISORDERS 1966 INWOOD RD. DALLAS, TX 75235	751305566	501(C)(3)	34,084.				DONOR DESIGNATIONS
(12) CANCER CARE SERVICES - FT. WORTH 623 S. HENDERSON FT. WORTH, TX 76104	751025511	501(C)(3)	6,872.				DONOR DESIGNATIONS

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Schedule I (Form 990) (2015)

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**Grants and Other Assistance to Organizations,
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- 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
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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
(1) CAPITAL FOR KIDS 2807 ALLEN ST., #816 DALLAS, TX 75204	204403950	501(C)(3)	11,781.				DONOR DESIGNATIONS
(2) CASA MANANA 3101 W. LANCASTER AVE. FORT WORTH, TX 76107	750987585	501(C)(3)	7,854.				DONOR DESIGNATIONS
(3) CASA OF COLLIN COUNTY 101 E. DAVIS ST. MCKINNEY, TX 75069	752391961	501(C)(3)	63,469.				DONOR DESIGNATIONS
(4) CASA OF DENTON COUNTY P.O. BOX 2885 DENTON, TX 76202	752417472	501(C)(3)	21,356.				DONOR DESIGNATIONS
(5) CATHOLIC CHARITIES OF DALLAS 9461 LBJ FREEWAY DALLAS, TX 75243	752745221	501(C)(3)	281,491.				DONOR DESIGNATIONS
(6) CATHOLIC CHARITIES OF FORT WORTH P. O. BOX 15610 FORT WORTH, TX 76119	750808769	501(C)(3)	11,207.				DONOR DESIGNATIONS
(7) CHILD & FAMILY GUIDANCE CENTER 8915 HARRY HINES BLVD. DALLAS, TX 75235	750800630	501(C)(3)	9,836.				DONOR DESIGNATIONS
(8) CHILDCAREGROUP 8585 N. STEMMONS FWY. DALLAS, TX 75247	750800634	501(C)(3)	15,298.				DONOR DESIGNATIONS
(9) CHILDREN FIRST COUNSELING CENTER P.O. BOX 532147 GRAND PRAIRIE, TX 75053	752100237	501(C)(3)	6,236.				DONOR DESIGNATIONS
(10) CHILDREN'S ADVOCACY CENTER FOR DENTON CTY. 1854 CAIN DR. LEWISVILLE, TX 75077	752559765	501(C)(3)	25,442.				DONOR DESIGNATIONS
(11) CHILDREN'S ADVOCACY CENTER OF COLLIN COUNTY 2205 LOS RIOS BLVD. PLANO, TX 75074	752389095	501(C)(3)	90,646.				DONOR DESIGNATIONS
(12) CHILDREN'S MEDICAL CENTER OF DALLAS 1935 MEDICAL DISTRICT DR. DALLAS, TX 75235	750800628	501(C)(3)	148,386.				DONOR DESIGNATIONS

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Schedule I (Form 990) (2015)

**SCHEDULE I
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**Grants and Other Assistance to Organizations,
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(1) CHRISTIAN COMMUNITY ACTION 200 S. MILL ST. LEWISVILLE, TX 75057	237319371	501(C)(3)	24,313.				DONOR DESIGNATIONS
(2) CITIZENS DEVELOPMENT CENTER 8800 AMBASSADOR ROW DALLAS, TX 75247	751008422	501(C)(3)	6,425.				DONOR DESIGNATIONS
(3) CITY HOUSE 902 E. 16TH ST. PLANO, TX 75074	752213291	501(C)(3)	13,689.				DONOR DESIGNATIONS
(4) CITY SQUARE 511 N. AKARD DALLAS, TX 75201	752332948	501(C)(3)	56,509.				DONOR DESIGNATIONS
(5) COLLIN COUNTY COMMITTEE ON AGING 600 N. TENNESSEE ST. MCKINNEY, TX 75069	751544507	501(C)(3)	29,245.				DONOR DESIGNATIONS
(6) COMMUNITIES IN SCHOOLS OF THE DALLAS REGION 8700 N. STEMMONS FREEWAY DALLAS, TX 75247	752044117	501(C)(3)	11,756.				DONOR DESIGNATIONS
(7) COMMUNITY COUNCIL OF GREATER DALLAS 1341 W. MOCKINGBIRD LANE DALLAS, TX 75247	750800631	501(C)(3)	5,767.				DONOR DESIGNATIONS
(8) COMMUNITY ENRICHMENT CENTER 6250 N.E. LOOP N. RICHLAND HILLS, TX 76180	752231694	501(C)(3)	9,061.				DONOR DESIGNATIONS
(9) DALLAS ARBORETUM AND BOTANICAL SOCIETY 8617 GARLAND AVE. DALLAS, TX 75218	237375815	501(C)(3)	14,131.				DONOR DESIGNATIONS
(10) DALLAS AREA HABITAT FOR HUMANITY 2800 N. HAMPTON RD. DALLAS, TX 75212	752097161	501(C)(3)	26,442.				DONOR DESIGNATIONS
(11) DALLAS CASA 2757 SWISS AVE. DALLAS, TX 75204	751866204	501(C)(3)	12,061.				DONOR DESIGNATIONS
(12) DALLAS CHILDREN'S ADVOCACY CENTER 3611 SWISS AVE. DALLAS, TX 75204	752303404	501(C)(3)	73,084.				DONOR DESIGNATIONS

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(1) DALLAS LIGHTHOUSE FOR THE BLIND 4306 CAPITAL AVE. DALLAS, TX 75204	750968301	501(C)(3)	14,617.				DONOR DESIGNATIONS
(2) DALLAS WOMEN'S FOUNDATION 8150 N. CENTRAL EXPWY. 110 DALLAS, TX 75206	752048261	501(C)(3)	7,854.				DONOR DESIGNATIONS
(3) DEAF ACTION CENTER 3115 CRESTVIEW DR. DALLAS, TX 75209	751575599	501(C)(3)	5,175.				DONOR DESIGNATIONS
(4) DENTON COUNTY FRIENDS OF THE FAMILY 1400 CRESCENT DENTON, TX 76201	751734175	501(C)(3)	15,708.				DONOR DESIGNATIONS
(5) DR PEPPER SNAPPLE GROUP EMPLOYEE RELIEF FD. 5301 LEGACY DR. PLANO, TX 75024	412184477	501(C)(3)	9,945.				DONOR DESIGNATIONS
(6) EDUCATION IS FREEDOM FOUNDATION 2711 N. HASKELL AVE. DALLAS, TX 75204	043643313	501(C)(3)	45,740.				DONOR DESIGNATIONS
(7) FAMILY COMPASS 4210 JUNIUS ST. DALLAS, TX 75246	752400158	501(C)(3)	16,480.				DONOR DESIGNATIONS
(8) FAMILY GATEWAY 600 JACKSON ST. DALLAS, TX 75202	752105579	501(C)(3)	5,891.				DONOR DESIGNATIONS
(9) FIRST BOOK 1319 F ST. N.W. WASHINGTON, DC 20004	521779606	501(C)(3)	8,946.				DONOR DESIGNATIONS
(10) FORNEY AREA UNITED WAY P.O. BOX 821 FORNEY, TX 75126	751742830	501(C)(3)	7,292.				DONOR DESIGNATIONS
(11) GIRL SCOUTS OF N.E. TEXAS 600 SUMMERSIDE DR. DALLAS, TX 75252	751101571	501(C)(3)	76,244.				DONOR DESIGNATIONS
(12) GIRLS INCORPORATED OF METROPOLITAN DALLAS 2040 EMPIRE CENTRAL DALLAS, TX 75235	751305705	501(C)(3)	48,848.				DONOR DESIGNATIONS

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(1) GOODWILL INDUSTRIES OF DALLAS 3020 N.W. MORELAND RD. DALLAS, TX 75212	750800649	501(C)(3)	16,464.				DONOR DESIGNATIONS
(2) GRAPEVINE RELIEF AND COMMUNITY EXCHANGE P.O. BOX 412 GRAPEVINE, TX 76099	752195702	501(C)(3)	18,172.				DONOR DESIGNATIONS
(3) HABITAT FOR HUMANITY - GREATER GARLAND 1110 MAIN ST. GARLAND, TX 75040	752499430	501(C)(3)	7,739.				DONOR DESIGNATIONS
(4) HENDERSON COUNTY UNITED WAY (TX) P.O. BOX 1435 ATHENS, TX 75751	751638907	501(C)(3)	5,935.				DONOR DESIGNATIONS
(5) HOPE COTTAGE PREGNANCY & ADOPTION CENTER 4209 MCKINNEY DALLAS, TX 75205	750800652	501(C)(3)	46,474.				DONOR DESIGNATIONS
(6) HOPE'S DOOR 820 F AVE., STE 100 PLANO, TX 75074	752038796	501(C)(3)	43,933.				DONOR DESIGNATIONS
(7) HOUSING CRISIS CENTER 4210 JUNIUS ST. DALLAS, TX 75246	751633304	501(C)(3)	8,525.				DONOR DESIGNATIONS
(8) INTERFAITH HOUSING COALITION P.O. BOX 720206 DALLAS, TX 75372	752028254	501(C)(3)	42,701.				DONOR DESIGNATIONS
(9) IRVING CARES 440 S. NURSERY RD. IRVING, TX 75017	751436937	501(C)(3)	32,257.				DONOR DESIGNATIONS
(10) JEWISH COMMUNITY CENTER OF DALLAS 7900 N. AVEN RD. DALLAS, TX 75230	750800654	501(C)(3)	8,454.				DONOR DESIGNATIONS
(11) JEWISH FAMILY SERVICE OF DALLAS, INC. 5402 ARAPAHO RD. DALLAS, TX 75248	751992728	501(C)(3)	42,927.				DONOR DESIGNATIONS
(12) JEWISH FEDERATION OF FT. WORTH & TARRANT CO 4049 KINGSRIDGE RD. FORT WORTH, TX 76109	750808797	501(C)(3)	12,320.				DONOR DESIGNATIONS

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) JUBILEE PARK & COMMUNITY CENTER CORPORATION 907 BANK ST. DALLAS, TX 75223	752726296	501(C)(3)	10,898.				DONOR DESIGNATIONS
(2) JUNIOR ACHIEVEMENT OF DALLAS 1201 EXECUTIVE DR. W. RICHARDSON, TX 75081	750881589	501(C)(3)	10,043.				DONOR DESIGNATIONS
(3) KIPP DALLAS/FORT WORTH 3200 S. LANCASTER RD. DALLAS, TX 75216	820578155	501(C)(3)	11,635.				DONOR DESIGNATIONS
(4) KNOCK KNOCK CHILDREN'S MUSEUM INC. 2561 CITIPLACE COURT BATON ROUGE, LA 70808	731701786	501(C)(3)	7,854.				DONOR DESIGNATIONS
(5) LAUNCHABILITY 4350 SIGMA RD. DALLAS, TX 75244	751189353	501(C)(3)	19,404.				DONOR DESIGNATIONS
(6) LIFT (LITERACY INSTRUCTION FOR TEXAS) 2121 MAIN ST. DALLAS, TX 75201	751095223	501(C)(3)	20,987.				DONOR DESIGNATIONS
(7) MANNA HOUSE OF MIDLOTHIAN 210 W. AVE. F MIDLOTHIAN, TX 76065	752442266	501(C)(3)	8,815.				DONOR DESIGNATIONS
(8) MERCY ST. 3801 HOLYSTONE ST. DALLAS, TX 75212	450536344	501(C)(3)	32,430.				DONOR DESIGNATIONS
(9) MESQUITE SOCIAL SERVICES 1035 MILITARY PARKWAY MESQUITE, TX 75149	751108455	501(C)(3)	23,188.				DONOR DESIGNATIONS
(10) METROCREST SOCIAL SERVICES 13801 HUTTON DR. FARMERS BRANCH, TX 75234	751548334	501(C)(3)	28,707.				DONOR DESIGNATIONS
(11) MI ESCUELITA PRESCHOOLS 4231 MAPLE AVE. DALLAS, TX 75204	751728505	501(C)(3)	62,201.				DONOR DESIGNATIONS
(12) MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211	840404235	501(C)(3)	6,042.				DONOR DESIGNATIONS

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) MOMENTIOUS INSTITUTE 106 E. 10TH ST. DALLAS, TX 75203	751855620	501(C)(3)	35,413.				DONOR DESIGNATIONS
(2) MOSAIC FAMILY SERVICES 4144 N. CENTRAL EXPWY. DALLAS, TX 75204	752484565	501(C)(3)	19,119.				DONOR DESIGNATIONS
(3) MY POSSIBILITIES 1301 CUSTER RD. PLANO, TX 75075	261509133	501(C)(3)	28,591.				DONOR DESIGNATIONS
(4) NATIONAL CENTER FOR WOMEN AND INFO. TECH. P.O. BOX 322 UCP BOULDER, CO 80309	680591481	501(C)(3)	8,253.				DONOR DESIGNATIONS
(5) NEXUS RECOVERY CENTER 8733 LAPRADA DR. DALLAS, TX 75228	237169388	501(C)(3)	36,748.				DONOR DESIGNATIONS
(6) NORTH TEXAS FOOD BANK 4500 S. COCKRELL HILL RD. DALLAS, TX 75236	751785357	501(C)(3)	49,646.				DONOR DESIGNATIONS
(7) N. TEXAS JUNIOR GOLF & EDUCATION FOUNDATION 2909 COLE AVE., #305 DALLAS, TX 75204	752602809	501(C)(3)	15,708.				DONOR DESIGNATIONS
(8) PARKLAND FOUNDATION 2777 N. STEMMONS FWY. DALLAS, TX 75207	752089180	501(C)(3)	13,622.				DONOR DESIGNATIONS
(9) PEDIPLACE 502 S. OLD ORCHARD LN. LEWISVILLE, TX 75067	752512752	501(C)(3)	6,141.				DONOR DESIGNATIONS
(10) PLANO ISD EDUCATION FOUNDATION 2700 W. 15TH ST. PLANO, TX 75075	752481906	501(C)(3)	28,691.				DONOR DESIGNATIONS
(11) PRESTONWOOD CHRISTIAN ACADEMY 6801 W. PARK BLVD. PLANO, TX 75093	752707809	501(C)(3)	7,854.				DONOR DESIGNATIONS
(12) PRISON ENTREPRENEURSHIP PROGRAM 4140 DIRECTORS ROW, STE B HOUSTON, TX 77092	201384253	501(C)(3)	8,380.				DONOR DESIGNATIONS

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

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) RAINBOW DAYS 8150 N. CENTRAL EXPWY. DALLAS, TX 75206	751844908	501(C)(3)	9,846.				DONOR DESIGNATIONS
(2) READING PARTNERS DALLAS 2910 SWISS AVE. DALLAS, TX 75204	770568469	501(C)(3)	11,481.				DONOR DESIGNATIONS
(3) RESOURCE CENTER OF DALLAS 2701 REAGAN ST. DALLAS, TX 75219	751892059	501(C)(3)	39,328.				DONOR DESIGNATIONS
(4) ROCKWALL COUNTY HELPING HANDS 950 WILLIAMS ST. ROCKWALL, TX 75087	752402276	501(C)(3)	38,915.				DONOR DESIGNATIONS
(5) SAFEHAVEN OF TARRANT COUNTY 8701 W. BEDFORD EULESS RD. HURST, TX 76053	751670281	501(C)(3)	5,758.				DONOR DESIGNATIONS
(6) SAMARITAN INN 1710 N. MCDONALD ST. MCKINNEY, TX 75071	751984285	501(C)(3)	72,199.				DONOR DESIGNATIONS
(7) SOUTHWESTERN METHODIST UNIVERSITY P.O. BOX 750402 DALLAS, TX 75275	750800689	501(C)(3)	10,273.				DONOR DESIGNATIONS
(8) SOUTHWESTERN DIABETIC FOUNDATION P.O. BOX 918 GAINESVILLE, TX 76241	756002547	501(C)(3)	37,300.				DONOR DESIGNATIONS
(9) ST. PHILIP'S SCHOOL & COMMUNITY CENTER 1600 PENNSYLVANIA AVE. DALLAS, TX 75215	751097360	501(C)(3)	18,009.				DONOR DESIGNATIONS
(10) THE BRIDGE BRE. NETWORK 3600 GASTON AVE., STE 401 DALLAS, TX 75246	752436606	501(C)(3)	16,933.				DONOR DESIGNATIONS
(11) THE CONCILIO 400 S. ZANG BLVD. DALLAS, TX 75208	751770140	501(C)(3)	9,541.				DONOR DESIGNATIONS
(12) THE FAMILY PLACE 4300 MACARTHUR AVE. DALLAS, TX 75209	751590896	501(C)(3)	110,294.				DONOR DESIGNATIONS

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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Department of the Treasury
Internal Revenue Service

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

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Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

Part I General Information on Grants and Assistance

- 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
- 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
(1) THE GREATER DALLAS COUNCIL 1349 EMPIRE CENTRAL DR. DALLAS, TX 75247	750808776	501(C)(3)	17,237.				DONOR DESIGNATIONS
(2) THE SALVATION ARMY DFW METROPLEX COMMAND 8787 N. STEMMONS FWY. DALLAS, TX 75247	580660607	501(C)(3)	137,991.				DONOR DESIGNATIONS
(3) THE SALVATION ARMY TARRANT CTY. TERRITORIAL P.O. BOX 2333 FORT WORTH, TX 76113	580660607	501(C)(3)	5,092.				DONOR DESIGNATIONS
(4) THE SENIOR SOURCE 3910 HARRY HINES BLVD. DALLAS, TX 75219	751085555	501(C)(3)	67,237.				DONOR DESIGNATIONS
(5) THE WARREN CENTER 320 CUSTER RD. RICHARDSON, TX 75080	751282040	501(C)(3)	12,292.				DONOR DESIGNATIONS
(6) TRINITY RIVER MISSION 2060 SINGLETON BLVD. DALLAS, TX 75212	756055203	501(C)(3)	13,752.				DONOR DESIGNATIONS
(7) TURNING POINT 3325 SILVERSTONE PLANO, TX 75023	752065785	501(C)(3)	5,997.				DONOR DESIGNATIONS
(8) TURTLE CREEK MANOR 2820 SWISS AVE. DALLAS, TX 75204	751282276	501(C)(3)	13,929.				DONOR DESIGNATIONS
(9) TXU ENERGY AID P.O. BOX 650257 DALLAS, TX 75265	751837355	501(C)(3)	34,600.				DONOR DESIGNATIONS
(10) UNITED WAY FOR GREATER AUSTIN 2000 E. M.L.K. JR. BLVD. AUSTIN, TX 78702	741193439	501(C)(3)	5,692.				DONOR DESIGNATIONS
(11) UNITED WAY FOR SOUTHEASTERN MICHIGAN 660 WOODWARD AVE. DETROIT, MI 48226	203099071	501(C)(3)	9,823.				DONOR DESIGNATIONS
(12) UNITED WAY FOUNDATION OF METRO. DALLAS 1800 N. LAMAR ST. DALLAS, TX 75202	752834344	501(C)(3)	53,010.				DONOR DESIGNATIONS

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

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

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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Department of the Treasury
Internal Revenue Service

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

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Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) UNITED WAY OF CENTRAL NEW MEXICO 2340 ALAMO S.E. ALBUQUERQUE, NM 87106	850277138	501(C)(3)	12,771.				DONOR DESIGNATIONS
(2) UNITED WAY OF DENTON COUNTY 625 DALLAS DR. DENTON, TX 76205	751251128	501(C)(3)	48,793.				DONOR DESIGNATIONS
(3) UNITED WAY OF GRAYSON COUNTY P.O. BOX 1112 SHERMAN, TX 75091	237087293	501(C)(3)	7,818.				DONOR DESIGNATIONS
(4) UNITED WAY OF GREATER ATLANTA 100 EDGEWOOD AVE. N.E. ATLANTA, GA 30303	580566194	501(C)(3)	5,451.				DONOR DESIGNATIONS
(5) UNITED WAY OF GREATER HOUSTON 50 WAUGH DR. HOUSTON, TX 77007	741167964	501(C)(3)	12,844.				DONOR DESIGNATIONS
(6) UNITED WAY OF HUNT COUNTY P.O. BOX 224 GREENVILLE, TX 75403	750971619	501(C)(3)	5,023.				DONOR DESIGNATIONS
(7) UNITED WAY OF JOHNSON COUNTY (TX) P.O. BOX 31 CLEBURNE, TX 76033	751101239	501(C)(3)	5,885.				DONOR DESIGNATIONS
(8) UNITED WAY OF KAUFMAN COUNTY P.O. BOX 648 TERRELL, TX 75160	752420233	501(C)(3)	11,650.				DONOR DESIGNATIONS
(9) UNITED WAY OF MIDLAND (TX) 1209 W. WALL ST. MIDLAND, TX 79701	750945926	501(C)(3)	18,356.				DONOR DESIGNATIONS
(10) UNITED WAY OF RHODE ISLAND 50 VALLEY ST. PROVIDENCE, RI 02909	050276059	501(C)(3)	7,994.				DONOR DESIGNATIONS
(11) UNITED WAY OF SAN ANTONIO & BEXAR COUNTY P.O. BOX 898 SAN ANTONIO, TX 78293	741272381	501(C)(3)	14,315.				DONOR DESIGNATIONS
(12) UNITED WAY OF TARRANT COUNTY P.O. BOX 4448 FORT WORTH, TX 76164	750858360	501(C)(3)	320,414.				DONOR DESIGNATIONS

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

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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
(1) UNITED WAY OF THE CAPE FEAR AREA (NC) 5919 OLEANDER DR. WILMINGTON, NC 28403	560529949	501(C)(3)	6,187.				DONOR DESIGNATIONS
(2) UNITED WAY OF THE NATIONAL CAPITAL AREA 1577 SPRING HILL RD. VIENNA, VA 22182	530234290	501(C)(3)	8,267.				DONOR DESIGNATIONS
(3) UNITED WAY OF W. ELLIS COUNTY P.O. BOX 1025 MIDLOTHIAN, TX 76065	756002917	501(C)(3)	35,231.				DONOR DESIGNATIONS
(4) UNITED WAY SILICON VALLEY 1400 PARKMOOR AVE. SAN JOSE, CA 95126	941450153	501(C)(3)	21,661.				DONOR DESIGNATIONS
(5) UPLIFT EDUCATION 606 E. ROYAL LANE IRVING, TX 75039	752659683	501(C)(3)	14,681.				DONOR DESIGNATIONS
(6) VICKERY MEADOW LEARNING CENTER 6329 RIDGECREST RD. DALLAS, TX 75231	752708992	501(C)(3)	17,481.				DONOR DESIGNATIONS
(7) VISITING NURSE ASSOCIATION OF TEXAS 1600 VICEROY DR. DALLAS, TX 75235	750800692	501(C)(3)	72,820.				DONOR DESIGNATIONS
(8) VOGEL ALCOVE 7557 RAMBLER RD. DALLAS, TX 75231	752133827	501(C)(3)	25,323.				DONOR DESIGNATIONS
(9) VOLUNTEER CENTER OF N. TEXAS 2800 LIVE OAK ST. DALLAS, TX 75204	751364145	501(C)(3)	8,053.				DONOR DESIGNATIONS
(10) WINGS (FORMERLY YWCA OF METRO. DALLAS) 4144 N. CENTRAL EXPRESSWAY DALLAS, TX 75204	750800699	501(C)(3)	41,733.				DONOR DESIGNATIONS
(11) YMCA OF METROPOLITAN DALLAS 1621 W. WALNUT HILL IRVING, TX 75038	750800696	501(C)(3)	36,249.				DONOR DESIGNATIONS
(12) YOUNG WOMEN'S PREPARATORY NETWORK 2804 SWISS AVE. DALLAS, TX 75204	470902114	501(C)(3)	6,686.				DONOR DESIGNATIONS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 239.

3 Enter total number of other organizations listed in the line 1 table ▶ 4.

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

Schedule I (Form 990) (2015)

Part III Grants and Other Assistance to Individuals in the United States. 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
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U.S.

SCHEDULE I, PART I, LINE 2

AS PART OF THE GRANT AGREEMENT, AN AGENCY AGREES TO OPERATE PROGRAMS IN A MANNER CONSISTENT WITH INFORMATION COMMUNICATED TO UWMD AND TO REGULARLY REPORT ON THOSE PROGRAMS SUPPORTED BY UWMD FUNDING. FOR GRANTS MADE IN SUPPORT OF PROGRAM OPERATIONS COSTS, THE AGENCY WILL REPORT INFORMATION BASED ON SIX CATEGORIES (DEMOGRAPHICS, ZIP CODES SERVED, DOLLARS SPENT, SUCCESS STORIES, OUTCOMES AND BUDGET), UNLESS SPECIAL ARRANGEMENTS HAVE BEEN MADE AND AGREED TO, IN WRITING, BY BOTH THE AGENCY AND UWMD. AN APPROVED OUTCOME PLAN WILL BE PART OF EACH PROGRAM REPORT, WITH RESULTS

Part III Grants and Other Assistance to Individuals in the United States. 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
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

BEING REPORTED IN A MANNER CONSISTENT WITH THE APPROVED PLAN. FAILURE TO HAVE AN APPROVED PLAN OR TO REPORT IN AN APPROPRIATE MANNER WILL LEAD TO A REVIEW OF GRANT FUNDING. ANY MATERIAL CHANGE IN THE OPERATING OF A PROGRAM THAT IS GRANT FUNDED WILL BE REPORTED TO UWMD IN A TIMELY MANNER, WITH CONTINUED FUNDING SUBJECT TO UWMD REVIEW. AS PART OF THE SCREENING PROCESS, ALL AGENCIES ARE ALSO REQUIRED TO SIGN A USA PATRIOT ACT COMPLIANCE FORM THAT REQUIRES AGENCIES TO CERTIFY THAT UWMD FUNDS AND DONATIONS WILL BE USED IN COMPLIANCE WITH ALL APPLICABLE ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, AND EXECUTIVE ORDERS. UWMD ALSO VERIFIES CURRENT 501(C)(3) STATUS AND SCREENS THE AGENCY TO ENSURE

Part III Grants and Other Assistance to Individuals in the United States. 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
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

IT IS NOT LISTED ON TERRORIST WATCH LISTS. ORGANIZATIONS RECEIVING DESIGNATED CONTRIBUTIONS THROUGH UNITED WAY ARE SUBJECT TO VETTING AND SCREENING THROUGH SUPPORT SERVICES PROVIDED BY GUIDESTAR. IN ADDITION TO DESIGNATED PAYMENTS OF \$5,000 OR MORE ITEMIZED ON SCHEDULE I, UWMD PAID 696 AGENCIES RECEIVING LESS THAN \$5,000 FOR A TOTAL OF \$494,683.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Compensation Information

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

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

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Employer identification number

75-6005352

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 checked="" 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 checked="" type="checkbox"/> Written employment contract |
| <input 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? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- 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? **5a**
- b** Any related organization? **5b**
- 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? **6a**
- b** Any related organization? **6b**
- 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
1a	X	
2	X	
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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	JENNIFER SAMPSON PRESIDENT AND CEO	(i) 336,537.	70,980.	720.	39,844.	20,678.	468,759.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	WANDA MIZUTOWICZ CFO	(i) 157,588.	12,480.	2,210.	10,982.	7,746.	191,006.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	SUSAN HOFF COO	(i) 238,657.	58,520.	2,064.	16,884.	15,451.	331,576.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	AMY CAMP VP, MAJOR & PLANNED GIVING/UFC	(i) 135,396.	13,390.	270.	8,289.	12,083.	169,428.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	DANA BROWN CHIEF MARKETING OFFICER	(i) 160,401.	20,330.	311.	7,506.	5,986.	194,534.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6	JILL STEPHENSON SR VP MAJOR & PLANNED GIVING	(i) 165,895.	0.	774.	4,144.	7,981.	178,794.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7	KATHRYN SAWERS CHIEF DEVELOPMENT OFFICER	(i) 161,522.	23,784.	10,468.	0.	13,775.	209,549.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8		(i)						
	(ii)							
9		(i)						
	(ii)							
10		(i)						
	(ii)							
11		(i)						
	(ii)							
12		(i)						
	(ii)							
13		(i)						
	(ii)							
14		(i)						
	(ii)							
15		(i)						
	(ii)							
16		(i)						
	(ii)							

Part III Supplemental Information

Complete this part to 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 I, LINE 1A

UNITED WAY OF METROPOLITAN DALLAS, INC. (UWMD) REIMBURSES EMPLOYEES FOR HEALTH CLUB MEMBERSHIPS AT THE END OF EACH CALENDAR YEAR FOR UP TO \$10 FOR EACH MONTH THEY ARE EMPLOYEED WITH UWMD.

SCHEDULE J, PART I, LINE 4B

JENNIFER SAMPSON RECEIVED PAYMENTS FROM UWMD TO HER 457F PLAN. THE PAYMENTS TOTALED \$21,294 FOR CALENDAR YEAR 2015 AND ARE REPORTED IN SCHEDULE J, COLUMN C ALONG WITH THE PAYMENTS TO HER 403B PLAN.

**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 METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

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	30.	264,611.	SALE PRICE LESS FEES
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (IN-KIND GOODS)	X	4.	527,020.	MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		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.		

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

Schedule M (Form 990) (2015)

JSA

Part II **Supplemental Information.** Complete this part to 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.

THIRD PARTY ASSISTANCE OF NONCASH CONTRIBUTIONS

SCH M, PART I, LINE 32B

UNITED WAY OF METROPOLITAN DALLAS, INC. (UWMD) USES THIRD PARTY

ORGANIZATIONS TO CONVERT DONOR GIFTS OF MARKETABLE SECURITIES TO CASH.

UPON RECEIVING THE SECURITY, THE VALUE OF THE SECURITY IS DETERMINED BY

USING THE SECURITY'S MEDIAN VALUE, AS OF THE DAY RECEIVED, MULTIPLIED BY

THE NUMBER OF SHARES RECEIVED.

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.**

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

75-6005352

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

AN INDEPENDENT FIRM SPECIALIZING IN TAX PREPARATION SERVICES PREPARES THE 990 FORM USING INFORMATION FROM AUDITED FINANCIAL STATEMENTS AND INFORMATION PROVIDED BY UNITED WAY OF METROPOLITAN DALLAS (UWMD) STAFF. UWMD STAFF REVIEWED THE COMPLETED FORM 990. THE RETURN IS THEN DELIVERED TO MEMBERS OF THE AUDIT AND ETHICS COMMITTEE AND BOARD FOR REVIEW AND COMMENTS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT

FORM 990, PART VI, LINE 12C

THE CODE OF BUSINESS CONDUCT, ETHICS, AND CONFLICT OF INTEREST IS DISTRIBUTED TO DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS, AND EMPLOYEES ON AN ANNUAL BASIS. DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS, AND EMPLOYEES ARE REQUIRED TO SIGN AN AFFIRMATIVE ACTION STATEMENT OF COMPLIANCE AND TO DISCLOSE TO UWMD ANY FINANCIAL OR OTHER RELATIONSHIPS THAT COULD POTENTIALLY GIVE RISE TO A CONFLICT OF INTEREST ALONG WITH THE REASONS, IF ANY, THEY BELIEVE SUCH RELATIONSHIPS WOULD NOT VIOLATE THE CONFLICT OF INTEREST DEFINITIONS PER THE IRS INSTRUCTIONS TO THE FORM 990. BOARD MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM DISCUSSIONS AND DECISIONS IMPACTING POTENTIAL CONFLICT OF INTERESTS. COMPLETED CODE OF BUSINESS CONDUCT, ETHICS, AND CONFLICT OF INTEREST FORMS ARE REVIEWED BY THE LEADERSHIP TEAM TO DETERMINE IF FURTHER ACTIONS ARE REQUIRED.

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number
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PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, LINES 15A & 15B

THE COMPENSATION COMMITTEE IS THE EXECUTIVE COMMITTEE OF THE BOARD. THE COMMITTEE HAS THE RESPONSIBILITY OF DETERMINING AND RECOMMENDING TO THE BOARD FOR APPROVAL THE SENIOR LEADERSHIP TEAM COMPENSATION AND BENEFITS. UWMD'S VICE PRESIDENT OF HUMAN RESOURCES PROVIDES FACTUAL, SUPPORTIVE, AND COMPARATIVE INFORMATION, AS REQUESTED. THE COMMITTEE REVIEWS AND APPROVES UWMD'S GOALS AND OBJECTIVES RELEVANT TO CEO COMPENSATION AND EVALUATES THE PERFORMANCE OF THE CEO ANNUALLY AGAINST THOSE GOALS AND OBJECTIVES. THE COMMITTEE RECOMMENDS TO THE BOARD, FOR APPROVAL, THE CEO'S COMPENSATION PACKAGE BASED ON THIS EVALUATION. THE DELIBERATIONS AND DECISIONS OF THE COMMITTEE ARE DOCUMENTED IN CONTEMPORANEOUS SUBSTANTIATION. THE COMMITTEE WILL REVIEW ANNUALLY ALL INCENTIVE COMPENSATION PLANS AND/OR SPECIAL COMPENSATION ARRANGEMENTS FOR MEMBERS OF UWMD'S LEADERSHIP TEAM AND OTHER STAFF MEMBERS AS APPROPRIATE, INCLUDING BONUS AND INCENTIVE AWARDS, SEVERANCE PACKAGES, EMPLOYMENT AGREEMENTS, AND/OR OTHER SPECIAL SUPPLEMENTAL BENEFITS.

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

FORM 990, PART VI, LINE 19

UWMD'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. REQUESTS MAY BE SENT TO UWMD ACCOUNTING AND FINANCE, 1800 N. LAMAR STREET, DALLAS, TX 75202. REQUESTS CAN ALSO BE MADE BY CALLING THE ACCOUNTING AND FINANCE DEPARTMENT AT (214)978-0000. AUDITED FINANCIAL STATEMENTS AND FILED 990 FORMS ARE AVAILABLE BY ACCESSING UWMD'S WEBSITE AT WWW.UNITEDWAYDALLAS.ORG. AFTER REACHING THE

Name of the organization

Employer identification number

UNITED WAY OF METROPOLITAN DALLAS, INC.

WEBSITE GO TO "ABOUT" THEN "FINANCIALS" TO OBTAIN THE NECESSARY
INFORMATION.

OTHER CHANGES IN NET ASSETS OR FUND BALANCES
FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

REVENUES:

PER AUDIT	\$ 38,189,207
DESIGNATIONS TO AGENCIES	\$ 21,525,456
LESS: DONATED SERVICES	\$ (220,995)
LESS: CHANGE IN TRUSTS	\$ 741,837
UNREALIZED GAIN ON INVESTMENTS	\$ (12,907)

TOTAL PER 990	\$ 60,222,598

DIFFERENCE \$22,033,391

EXPENSES:

PER AUDIT	\$ 39,729,589
DESIGNATIONS TO AGENCIES	\$ 20,619,126
LESS - DONATED SERVICES	\$ (220,995)

TOTAL PER 990	\$ 60,127,720

DIFFERENCE \$(21,938,513)

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

UNREALIZED LOSS ON LINE 5 \$ 12,907

OTHER CHANGES IN NET ASSETS OR FUND BALANCES \$ 1,648,167

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF UNITED WAY OF METROPOLITAN DALLAS, INC. (UWMD) IS TO IMPROVE LIVES IN OUR COMMUNITIES. UNITED WAY OF METROPOLITAN DALLAS, INC. COLLABORATES WITH MORE THAN 100 OF OUR REGION'S BEST COMMUNITY ORGANIZATIONS TO DELIVER HEALTH AND HUMAN SERVICE PROGRAMS THAT BENEFIT CHILDREN AND ADULTS IN THE AREAS OF EDUCATION, INCOME AND HEALTH.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4C

BUILDING AND ADMINISTERING COLLABORATIVE INITIATIVES THAT PREPARE KIDS TO GRADUATE AND SUCCEED, HELP FAMILIES LEAVE POVERTY PERMANENTLY, AND ENABLE PEOPLE TO LIVE HEALTH, RESPONSIBLE LIVES. EXAMPLES INCLUDE:

1. HEALTHY ZONE SCHOOL RECOGNITION PROGRAM, HELPING KIDS LEARN HEALTHY HABITS THAT CAN LAST A LIFETIME. IN FISCAL YEAR 2015-2016, UNITED WAY AND THE COOPER INSTITUTE PROVIDED EXPERTISE, FINANCIAL ASSISTANCE AND RECOGNITION TO 89 NORTH TEXAS SCHOOLS THAT CREATED HEALTHY ENVIRONMENTS FOR MORE THAN 59,000 STUDENTS. THEY ALSO USED A COMPETITIVE APPLICATION PROCESS TO IDENTIFY 27 MORE NORTH TEXAS

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Employer identification number

ATTACHMENT 2 (CONT'D)

SCHOOLS THAT WILL RECEIVE SUPPORT STARTING IN THE 2016-2017 SCHOOL YEAR, EXPANDING THE INITIATIVE TO HELP EVEN MORE LOCAL STUDENTS.

2. LEADERS IN SCIENCE PROGRAM ENHANCES EDUCATOR EFFECTIVENESS IN SCIENCE INSTRUCTION THROUGH PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR ELEMENTARY SCHOOL TEACHERS. IN FISCAL YEAR 2015-2016, THE PROGRAM SERVED 38 TEACHERS AND MORE THAN 717 KINDERGARTEN THROUGH 5TH GRADE STUDENTS.

3. SKILLS TO SUCCEED, HELPING AT-RISK STUDENTS GAIN 21ST CENTURY SKILLS NEEDED FOR COLLEGE AND THE WORKPLACE. IN FISCAL YEAR 2015-2016, UNITED WAY PARTNERED WITH CITY YEAR AND THE CONCILIO TO SERVE IN 5 AREA HIGH SCHOOLS TO COORDINATE PARENTAL INVOLVEMENT AND CAREER EXPLORATION SERVICES. UNITED WAY ALSO SPONSORED A TWO WEEK SUMMER CAMP IN PARTNERSHIP WITH THE DALLAS REGIONAL CHAMBER AS PART OF THIS PROGRAM. SKILLS TO SUCCEED SERVED MORE THAN 350 STUDENTS AND 140 PARENTS.

4. LEADERS TAKING ACTION PROGRAM EQUIPS EARLY CHILDHOOD CENTER DIRECTORS WITH THE TOOLS NECESSARY TO EFFECTIVELY LEAD TEACHING STAFF AND MEET QUALITY EARLY CHILDHOOD CENTER STANDARDS. IN FISCAL YEAR 2015-2016, THE PROGRAM SERVED 20 EARLY CHILDHOOD CENTERS DIRECTORS, MORE THAN 213 CENTER STAFF, AND 1354 CHILDREN.

5. FINANCIAL STABILITY NETWORK: COORDINATING AND EXPANDING NORTH TEXAS EFFORTS TO EQUIP HARDWORKING PEOPLE WITH THE TOOLS AND

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number
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ATTACHMENT 2 (CONT'D)

RESOURCES NEED TO INCREASE INCOME, SAVINGS AND CREDIT AND REDUCE DEBT IN ORDER TO BECOME ECONOMICALLY SELF-SUFFICIENT. IN FISCAL YEAR 2015-2016, UNITED WAY HELPED MORE THAN 13,000 INDIVIDUALS ACCESS OVER \$21 MILLION IN TAX REFUNDS AND SAVINGS, HELPED OVER 4,000 PEOPLE FIND BETTER EMPLOYMENT, HELPED OVER 1,200 PEOPLE ACHIEVE \$1.5 MILLION IN INCREASED SAVINGS AND DEBT REDUCTION, AND PROVIDED CAPACITY BUILDING AND NETWORKING OPPORTUNITIES TO MORE THAN 50 ORGANIZATIONS IN THE DFW REGION.

6. THE TEXAS HOME VISITING PROGRAM, FUNDED BY THE TEXAS HEALTH AND HUMAN SERVICES COMMISSION (HHSC), PROVIDES IN-HOME PARENT EDUCATION TO AT-RISK FAMILIES. APPROXIMATELY 500 CHILDREN AND THEIR FAMILIES RECEIVED HOME VISITING PROGRAM SERVICES DURING FY 2015-2016. ADDITIONALLY, THE PROGRAM HAS CREATED A SYSTEM TO MATCH FAMILIES WITH APPROPRIATE HOME VISITING SERVICE PROVIDERS.

ATTACHMENT 3990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BEYOND THE HORIZON TECHNOLOGY 4144 N. CENTRAL EXPRESSWAY, SUITE 600 DALLAS, TX 75204	COMPUTER PROGRAMMING	104,213.
FAYE SAWYERS PRODUCTIONS 2512 BELL STREET DALLAS, TX 75204	EVENT PLANNING	206,048.
LEGENDS HOSPITALITY 1 AT&T WAY	EVENT MANAGEMENT	132,332.

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC.	Employer identification number
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ATTACHMENT 3 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ARLINGTON, TX 76011		

ATTACHMENT 4

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INTEREST INCOME	64,527.			64,527.
DIVIDEND INCOME	33,867.			33,867.
TOTALS	<u>98,394.</u>			<u>98,394.</u>

ATTACHMENT 5

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
CERTIFICATES OF DEPOSIT	13,330,669.	FMV
TOTALS	<u>13,330,669.</u>	

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC.

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Employer identification number

75-6005352

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) UNITED WAY FDN OF METROPOLITAN DALLAS 75-2834344 1800 N. LAMAR STREET DALLAS, TX 75202	RCPT OF ENDW	TX	501(C)(3)	11-I	UWMD	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2015

JSA

5E1307 1.000

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	C	1,137,395.	FMV
(2) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	Q	1,106,698.	FMV
(3) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	C	350,000.	FMV
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
