EXTENDED TO FEBRUARY 15, 2017

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

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 — **2015** — Open to Public Inspection

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

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

C Name of organization: UNITED WAY OF THE SOUTHERN TIER, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 300 NASSER CIVIC CTR PL — Room/suite: 220

City or town, state or province, country, and ZIP or foreign postal code: CORNING, NY 14830

D Employer identification number: **-***1041

E Telephone number: (607)936-3753

G Gross receipts $ 5,269,794.

F Name and address of principal officer: STEPHEN HUGHES, SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No — If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW.UWST.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1993 **M** State of legal domicile: NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO UNITE AND PRIORITIZE RESOURCES TO IMPROVE THE QUALITY OF LIFE FOR EVERY PERSON AND FAMILY

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	8
6	Total number of volunteers (estimate if necessary)	6	832
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	4,340,943.	4,340,682.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	86,913.	43,904.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	121,718.	96,242.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,549,574.	4,480,828.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,738,967.	3,548,314.
	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)	513,902.	517,568.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 346,587.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	369,421.	309,094.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,622,290.	4,374,976.
	19	Revenue less expenses. Subtract line 18 from line 12	-72,716.	105,852.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	5,643,538.	5,894,618.
	21	Total liabilities (Part X, line 26)	2,342,238.	2,500,889.
	22	Net assets or fund balances. Subtract line 21 from line 20	3,301,300.	3,393,729.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date

▶ STEPHEN HUGHES, PRESIDENT

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JENNIFER ARBORE	JENNIFER ARBORE	01/23/17		P00893012

Firm's name ▶ EFPR GROUP, CPAS, PLLC — Firm's EIN ▶ **-***6160

Firm's address ▶ 8 DENISON PARKWAY E., SUITE 407, CORNING, NY 14830 — Phone no. 607-962-6891

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO UNITE AND PRIORITIZE RESOURCES TO IMPROVE THE QUALITY OF LIFE FOR EVERY PERSON AND FAMILY IN OUR COMMUNITY.

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

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

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

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

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

4a (Code:) (Expenses $ 3,548,314. including grants of $ 3,548,314.) (Revenue $)

CAMPAIGN ALLOCATIONS - CAMPAIGN ALLOCATIONS REFLECT ANNUAL CAMPAIGN PROCEEDS THAT ARE ALLOCATED TO VARIOUS LOCAL ORGANIZATIONS, AS DIRECTED BY A COMMITTEE OF THE BOARD OF DIRECTORS OF THE AGENCY. FUNDS RAISED IN THE ANNUAL CAMPAIGN ARE STRATEGICALLY ALLOCATED TO FULFILL THE AGENCY'S MISSION, IN A MANNER CONSISTENT WITH THE AGENCY'S VALUES THAT CONSIDER: CLIENT NEED, PROGRAM RESULTS, FOCUSED ALIGNMENT WITH STRATEGIC INTENT, EFFECTIVE USE OF RESOURCES, AND CONTINUOUS LEARNING AND IMPROVEMENT. FOCUS AREAS FOR ALLOCATION INCLUDE PROGRAMS RELATED TO CHILDREN & YOUTH, HEALTHY COMMUNITIES, STRONG FAMILIES, SELF-SUFFICIENCY, SENIOR INDEPENDENCE, AND VARIOUS SMALL GRANTS. COMMUNITY-BASED INITIATIVES (2-1-1 HELPLINE) ARE ALSO FUNDED THROUGH CAMPAIGN ALLOCATIONS. THE AMOUNT AVAILABLE FOR ALLOCATION IS DETERMINED BY THE GROSS CAMPAIGN

4b (Code:) (Expenses $ 35,042. including grants of $) (Revenue $)

COMMUNITY INVESTMENT - COMMUNITY INVESTMENTS REFLECTS THE COSTS ASSOCIATED WITH CONDUCTING THE COMMUNITY INVESTMENT (ALLOCATION) FUNCTION. THE FIGURE IS DERIVED BY A PERCENTAGE ASSIGNED TO FUNCTIONAL EXPENSES, AS DETERMINED BY A TIME STUDY OF STAFF ACTIVITIES. THE PERCENT OF OVERALL TIME DEDICATED TO THIS FUNCTION IS THEN APPLIED AGAINST VARIOUS EXPENSE CATEGORIES. THIS IS THE ONLY PROGRAM SERVICE AREA THAT INVOLVES DIRECT SERVICE PROVISION ON THE PART OF UNITED WAY.

4c (Code:) (Expenses $ 98,834. including grants of $) (Revenue $)

COMMUNITY BUILDING - COMMUNITY BUILDING REFLECTS THE COSTS ASSOCIATED WITH COLLECTIVE EFFORTS WITH VARIOUS COMMUNITY PARTNERS TO RESPOND TO SOCIAL ISSUES. THIS INCLUDES GATHERING CONSTITUENT VOICE (COMMUNITY CONVERSATIONS), CONVENING OR PARTICIPATING IN COMMUNITY TASK GROUPS THAT FOCUS ON SPECIFIC SOCIAL CONCERNS, IDENTIFYING COLLECTIVE STRATEGIES TO ADDRESS THE ISSUE(S), AND BRINGING IN ADDITIONAL PARTNERS THAT SHARE AN EXPERTISE IN MEETING THE IDENTIFIED CHALLENGES. THE FIGURE IS DERIVED BY A PERCENTAGE ASSIGNED TO FUNCTIONAL EXPENSES, AS DETERMINED BY A TIME STUDY OF STAFF ACTIVITIES. THE PERCENT OF OVERALL TIME DEDICATED TO THIS FUNCTION IS THEN APPLIED AGAINST VARIOUS EXPENSE CATEGORIES.

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

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

4e Total program service expenses ▶ 3,682,190.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV | Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year ..... 1a: 24 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b: 24				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶
LISA GILL - 607-936-3753
300 NASSER CIVIC CENTER PLAZA, SUITE 220, CORNING, NY 14830

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JUDITH MCINTOSH CHAIR	1.00	X		X				0.	0.	0.
(2) MARK CLARK IMMEDIATE PAST-CHAIR	1.00	X		X				0.	0.	0.
(3) ERNEST HARTMAN SECRETARY	1.00	X		X				0.	0.	0.
(4) FRANK VASSALLO TREASURER	1.00	X		X				0.	0.	0.
(5) HILLARY AUSTIN DIRECTOR	1.00	X						0.	0.	0.
(6) MARCI DANIELS DIRECTOR	1.00	X						0.	0.	0.
(7) JONATHAN HARTMAN DIRECTOR	1.00	X						0.	0.	0.
(8) JENNIFER MILLER DIRECTOR	1.00	X						0.	0.	0.
(9) KARA TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(10) LARRY BATES DIRECTOR	1.00	X						0.	0.	0.
(11) DAVID BLAUVELT DIRECTOR	1.00	X						0.	0.	0.
(12) MARTIN CASTELLANA DIRECTOR	1.00	X						0.	0.	0.
(13) PHIL DICKSON DIRECTOR	1.00	X						0.	0.	0.
(14) LOU DIFABIO DIRECTOR	1.00	X						0.	0.	0.
(15) ARNE FEYLING DIRECTOR	1.00	X						0.	0.	0.
(16) JAMES GENSEL DIRECTOR	1.00	X						0.	0.	0.
(17) JULIE MONAHAN DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) LYNN GROTTENTHALER DIRECTOR	1.00	X						0.	0.	0.
(19) AMBER PHELPS DIRECTOR	1.00	X						0.	0.	0.
(20) JUSTIN SALKIN DIRECTOR	1.00	X						0.	0.	0.
(21) LOU SOCHA DIRECTOR	1.00	X						0.	0.	0.
(22) NANCY SOCHA DIRECTOR	1.00	X						0.	0.	0.
(23) DALE WEBB DIRECTOR	1.00	X						0.	0.	0.
(24) ERIC ZAHRADKA DIRECTOR	1.00	X						0.	0.	0.
(25) LISA GILL DIRECTOR OF FINANCE & ADMI	40.00	X		X				66,461.	0.	5,385.
(26) STEPHEN HUGHES PRESIDENT & CEO	40.00	X		X				93,390.	0.	8,254.
1b Sub-total ▶								159,851.	0.	13,639.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								159,851.	0.	13,639.

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 ▶ 0

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII **Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 4,269,416.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 71,266.				
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a-1f ▶		4,340,682.			
Program Service Revenue		Business Code				
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f ▶					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		40,774.	40,774.		
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6 a Gross rents	7,533. /				
	b Less: rental expenses	0. /				
	c Rental income or (loss)	7,533. /				
	d Net rental income or (loss) ▶		7,533.			7,533.
	7 a Gross amount from sales of assets other than inventory	(i) Securities 745,863. / (ii) Other				
	b Less: cost or other basis and sales expenses	742,309. / 424.				
	c Gain or (loss)	3,554. / -424.				
	d Net gain or (loss) ▶		3,130.	3,554.		-424.
	8 a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	a 35,477.				
	b Less: direct expenses	b 46,233.				
	c Net income or (loss) from fundraising events ▶		-10,756.			-10,756.
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11 a MISCELLANEOUS INCOME	900099	99,465.	99,465.		
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d ▶		99,465.			
	12 **Total revenue.** See instructions. ▶		4,480,828.	143,793.	0.	-3,647.

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	3,548,314.	3,548,314.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	173,490.	27,412.	73,732.	72,346.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	262,067.	41,407.	111,378.	109,282.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	42,418.	6,701.	18,029.	17,688.
10 Payroll taxes	39,593.	6,256.	16,827.	16,510.
11 Fees for services (non-employees):				
a Management	15,594.		15,594.	
b Legal				
c Accounting	7,000.		7,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	62,986.	10,510.	1,965.	50,511.
13 Office expenses	17,380.	2,747.	7,386.	7,247.
14 Information technology				
15 Royalties				
16 Occupancy	108,233.	17,101.	45,999.	45,133.
17 Travel	7,621.	1,342.	997.	5,282.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,083.	3,881.	13,972.	1,230.
20 Interest				
21 Payments to affiliates	45,233.	7,147.	19,224.	18,862.
22 Depreciation, depletion, and amortization	5,986.	946.	2,544.	2,496.
23 Insurance	5,428.		5,428.	
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	12,056.	5,932.	6,124.	
b STRATEGY-ALIGNED EXPENS	2,494.	2,494.		
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	4,374,976.	3,682,190.	346,199.	346,587.
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 ▶ [X] if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		322,176.	1	315,583.
	2	Savings and temporary cash investments		715,811.	2	829,716.
	3	Pledges and grants receivable, net		2,098,180.	3	2,202,669.
	4	Accounts receivable, net		2,508.	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			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9,208.	9	18,034.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 124,328.			
	b	Less: accumulated depreciation	10b 109,481.	12,263.	10c	14,847.
	11	Investments - publicly traded securities		2,483,392.	11	2,513,769.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		5,643,538.	16	5,894,618.
Liabilities	17	Accounts payable and accrued expenses		49,119.	17	24,696.
	18	Grants payable		1,457,538.	18	1,449,252.
	19	Deferred revenue			19	9,167.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		835,581.	25	1,017,774.
	26	**Total liabilities.** Add lines 17 through 25		2,342,238.	26	2,500,889.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		2,918,142.	27	2,973,979.
	28	Temporarily restricted net assets		56,030.	28	92,622.
	29	Permanently restricted net assets		327,128.	29	327,128.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,301,300.	33	3,393,729.
	34	Total liabilities and net assets/fund balances		5,643,538.	34	5,894,618.

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	4,480,828.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,374,976.
3	Revenue less expenses. Subtract line 2 from line 1	3	105,852.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,301,300.
5	Net unrealized gains (losses) on investments	5	-13,423.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,393,729.

Part XII Financial Statements and Reporting

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

			Yes	No
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?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization	Employer identification number
UNITED WAY OF THE SOUTHERN TIER, INC.	**-***1041

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 [X] 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? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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.")	4,577,936.	4,427,013.	4,411,727.	4,295,480.	4,269,416.	21,981,572.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	4,577,936.	4,427,013.	4,411,727.	4,295,480.	4,269,416.	21,981,572.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						21,981,572.

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	4,577,936.	4,427,013.	4,411,727.	4,295,480.	4,269,416.	21,981,572.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61,076.	64,786.	54,643.	64,451.	48,307.	293,263.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	137,725.	136,512.	227,294.	154,095.	124,942.	780,568.
11 **Total support.** Add lines 7 through 10						23,055,403.

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 | 95.34 %

15 Public support percentage from 2014 Schedule A, Part II, line 14 | 15 | 95.29 %

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 ▶ ☒

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 ▶ ☐

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 ▶ ☐

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 ▶ ☐

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

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

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

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No" describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

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

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 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; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization
UNITED WAY OF THE SOUTHERN TIER, INC.

Employer identification number
-*1041

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

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

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	318,010.	316,960.	316,960.	315,660.	314,360.
b Contributions		1,050.		1,300.	1,300.
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	318,010.	318,010.	316,960.	316,960.	315,660.

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

a Board designated or quasi-endowment ▶ ______ %
b Permanent endowment ▶ 100.00 %
c Temporarily restricted endowment ▶ ______ %

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

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

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		124,328.	109,481.	14,847.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				14,847.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO OTHER AGENCIES	1,017,774.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	1,017,774.

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	3,869,358.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-13,423.		
b	Donated services and use of facilities	2b	17,606.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	46,233.		
e	Add lines **2a** through **2d**			2e	50,416.
3	Subtract line **2e** from line **1**			3	3,818,942.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	661,886.		
c	Add lines **4a** and **4b**			4c	661,886.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	4,480,828.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements			1	3,776,929.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	17,606.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	46,233.		
e	Add lines **2a** through **2d**			2e	63,839.
3	Subtract line **2e** from line **1**			3	3,713,090.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	661,886.		
c	Add lines **4a** and **4b**			4c	661,886.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	4,374,976.

Part XIII Supplemental Information.

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

PART X, LINE 2:

INCOME TAXES - THE AGENCY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE AGENCY'S TAX-EXEMPT PURPOSE IS SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME.

IN ACCORDANCE WITH ASC 740-10-50, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THE AGENCY RECOGNIZES THE TAX BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES. MANAGEMENT BELIEVES THAT THE AGENCY IS CURRENTLY OPERATING IN COMPLIANCE WITH THE APPLICABLE REQUIREMENTS OF THE INTERNAL REVENUE CODE. THEREFORE, NO LIABILITY FOR

Part XIII Supplemental Information *(continued)*

UNRECOGNIZED TAX BENEFITS HAS BEEN INCLUDED ON THE AGENCY'S FINANCIAL STATEMENTS. THE EXEMPT AGENCY'S INFORMATIONAL RETURNS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AUTHORITIES AND ITS OPEN AUDIT PERIODS ARE 2011 THROUGH 2013.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EVENTS EXPENSE	46,233.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

CAMPAIGN DESIGNATIONS	661,886.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EVENTS EXPENSE	46,233.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

CAMPAIGN DESIGNATIONS	661,886.

PART XII AND XIII, LINE 4B:

LINE 4B IN PART XII AND XIII ARE CAMPAIGN FUND DESIGNATIONS. THE SUPPORT RECEIVED IS IMMEDIATELY DISBURSED, DUE TO THE FACT THAT IT IS DISTRIBUTED TO THE DESIGNATIONS ASSIGNED BY THE DONOR. IT IS THEREFORE RECOGNIZED AS A REVENUE AND AN EXPENSE IN SECTION VIII OF THE IRS FORM 990. THESE FUNDS ARE RECOGNIZED AS AN ASSET AND A CORRESPONDING LIABILITY IN THE AUDITED FINANCIAL STATEMENTS OF THE AGENCY.

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

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
UNITED WAY OF THE SOUTHERN TIER, INC.	**-***1041

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
Total ▶						

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

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

		(a) Event #1 ANNUAL DINNER (event type)	(b) Event #2 KICKOFF EVENT (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	26,447.	9,000.		35,447.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	26,447.	9,000.		35,447.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	26,563.	19,670.		46,233.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				46,233.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-10,786.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: ____________

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ____________

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________ .

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization: UNITED WAY OF THE SOUTHERN TIER, INC.

Employer identification number: **-***1041

Part I **General Information on Grants and Assistance**

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEE SCHEDULE ATTACHED			2,886,428.	0.			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 42.

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

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

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

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

PART I, LINE 2:

UNITED WAY OF THE SOUTHERN TIER, INC. REQUIRES CERTAIN CRITERIA TO BE MET PRIOR TO AWARDING GRANTS. VOLUNTEER PANELS EVALUATE GRANT REQUESTS AND MAKE DECISIONS BASED ON COMMUNITY NEEDS AND THE GRANTEE'S ABILITY TO MEET THOSE NEEDS. GRANT APPLICATIONS ARE KEPT ON FILE TO REFLECT ELIGIBILITY AND RECORDS ARE ALSO KEPT ON THE AMOUNT OF GRANTS MADE TO EACH RECIPIENT. ALL AGENCIES RECEIVING OVER $10,000 IN FUNDING ARE REQUIRED TO SUBMIT QUARTERLY FINANCIAL REPORTS AND REPORT ON PROGRAM OUTCOMES.

Description of Grants and Other Assistance to Governments and Organizations in the United States

1 (a) Name and Address of organization or government					(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash grant	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Addison Community Programs Addison Central School	7 Cleveland Drive	Addison	NY	14801	16-6001452	501 (c)(3)	$9,457				Program Funding		Program Funding
Arbor Housing and Development	26 Bridge Street	Corning	NY	14830	16-1166737	501 (c)(3)	$174,452				Program Funding		Program Funding
Career Development Council	459 Philo Rd	Elmira	NY	14903	22-2309691	501 (c)(3)	$2,999				Program Funding		Program Funding
CASA of the Southern Tier, Inc.	PO Box 778	Corning	NY	14830	22-2984339	501 (c)(3)	$17,877				Program Funding		Program Funding
Catholic Charities of Chemung County	215 East Church Street, Suite 101	Elmira	NY	14901	36-4618548	501 (c)(3)	$96,323				Program Funding		Program Funding
Catholic Charities of Steuben County	23 Liberty Street	Bath	NY	14810	13-4365481	501 (c)(3)	$233,926				Program Funding		Program Funding
CCE of Chemung County	425 Pennsylvania Avenue	Elmira	NY	14904	16-6072875	501 (c)(3)	$54,852				Program Funding		Program Funding
Center For Dispute Settlement	16 East Main Street, Suite 800	Rochester	NY	14614	11-2526895	501 (c)(3)	$6,522				Program Funding		Program Funding
Chemung County Neighborhood Legal Svs Legal Assistance of Western New York,Inc	215 East Church Street, Suite 301	Elmira	NY	14901	16-955954	501 (c)(3)	$25,078				Program Funding		Program Funding
Chemung County Youth Bureau	599 Harris Hill Road	Elmira	NY	14903	16-6002557	501 (c)(3)	$9,319				Program Funding		Program Funding
CIDS	161 Sullivan Street	Elmira	NY	14901	16-0996008	501 (c)(3)	$141,771				Program Funding		Program Funding
Community Dispute Resolution Center, Inc	215 East Church Street, Suite 205	Elmira	NY	14901	22-3093783	501 (c)(3)	$16,718				Program Funding		Program Funding
Cornell Cooperative Extension of Steuben County	3 Pulteney Square East	Bath	NY	14810	16-6072895	501 (c)(3)	$27,404				Program Funding		Program Funding
Corning Meals On Wheels Inc.	144 Cedar Street	Corning	NY	14830	16-0912403	501 (c)(3)	$24,246				Program Funding		Program Funding
Economic Opportunity Program	650 Baldwin Street	Elmira	NY	14901	16-0906941	501 (c)(3)	$86,002				Program Funding		Program Funding
Faith in Action Steuben County	PO Box 117	Hornell	NY	14843	16-1561317	501 (c)(3)	$24,865				Program Funding		Program Funding
Family Reading Partnership	PO Box 3493	Elmira	NY	14905	20-2074184	501 (c)(3)	$12,858				Program Funding		Program Funding
Family Service Society, Inc.	280 Princeton Avenue Extension	Corning	NY	14830	16-0743189	501 (c)(3)	$320,069				Program Funding		Program Funding
Family Services of Chemung County, Inc.	1019 East Water Street	Elmira	NY	14901	16-0743995	501 (c)(3)	$94,013				Program Funding		Program Funding
Give Help (United Way of the Southern Tier, Inc.)	300 Civic Center Plaza, Suite 220	Corning	NY	14830	16-1451041	501 (c)(3)	$25,662				Program Funding		Program Funding

Description of Grants and Other Assistance to Governments and Organizations in the United States

1 (a) Name and Address of organization or government					(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash grant	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Finger Lakes Chapter American Red Cross	123 West Market Street	Corning	NY	14830	53-0196605	501 (c)(3)	$100,029				Program Funding		Program Funding
Five Rivers Boy Scout Council	244 West Water Street, Suite 10	Elmira	NY	14901	23-7421969	501 (c)(3)	$90,700				Program Funding		Program Funding
Fred & Harriett Taylor Memorial Library	21 William Street	Hammond-sport	NY	14840	22-3218648	501 (c)(3)	$2,732				Program Funding		Program Funding
Friends of the Addison Youth Center	21 Community Drive	Addison	NY	14801	16-1554204	501 (c)(3)	$34,044				Program Funding		Program Funding
Girl Scouts of NYPENN Pathways, Inc.	8170 Thompson Road	Cicero	NY	13039	16-0844808	501 (c)(3)	$77,030				Program Funding		Program Funding
Home & Health Care Services, Inc.	82 Main Street, 3rd Floor	Hornell	NY	14843	16-0771756	501 (c)(3)	$80,943				Program Funding		Program Funding
Hornell Area Concern For Youth, Inc.	76 East Main Street	Hornell	NY	14843	16-1060573	501 (c)(3)	$29,757				Program Funding		Program Funding
Hornell Area Family YMCA	18 Center Street	Hornell	NY	14843	16-0743237	501 (c)(3)	$23,853				Program Funding		Program Funding
Hornell Children's Home	233 Main Street	Hornell	NY	14843	16-0764346	501 (c)(3)	$19,176				Program Funding		Program Funding
Institute for Human Services	6666 County Route 11, Suite 2	Bath	NY	14810	22-2552824	501 (c)(3)	$156,292				Program Funding		Program Funding
Meals On Wheels of Chemung County Inc.	150 Fox Street	Elmira	NY	14901	16-1353247	501 (c)(3)	$19,311				Program Funding		Program Funding
Pro Action of Steuben and Yates, Inc.	117 East Steuben Street	Bath	NY	14810	16-0914512	501 (c)(3)	$454,814				Program Funding		Program Funding
Project Care	3 East Pulteney Square	Bath	NY	14810	16-6002567	501 (c)(3)	$6,618				Program Funding		Program Funding
Regional Science & Discovery Center	114 Pine Street, Suite 201	Corning	NY	14830	16-1462618	501 (c)(3)	$6,028				Program Funding		Program Funding
RSVP - Steuben County	3 East Pulteney Square	Bath	NY	14810	16-6002567	501 (c)(3)	$21,413				Program Funding		Program Funding
S2AY Rural Health Network, Inc.	PO Box 97	Corning	NY	14830	55-0810542	501 (c)(3)	$13,678				Program Funding		Program Funding
Salvation Army - Elmira	414 Lake Street	Elmira	NY	14901	13-5562351	501 (c)(3)	$70,310				Program Funding		Program Funding
Salvation Army Corning	32 Denison Parkway East	Corning	NY	14830	13-5562351	501 (c)(3)	$138,498				Program Funding		Program Funding
Southern Tier Legal Services Legal Assistance of Western New York Inc	104 East Steuben Street	Bath	NY	14810	16-955954	501 (c)(3)	$23,395				Program Funding		Program Funding
Southside Community Center	215 Partridge Street	Elmira	NY	14904	22-2201957	501 (c)(3)	$21,085				Program Funding		Program Funding
Stewart Park Preschool Stewart Park Housing Dev.	301 Walter Smith Terrace, Apt. 106	Corning	NY	14830	51-0180570	501 (c)(3)	$14,063				Program Funding		Program Funding
YWCA of Elmira & the Twin Tiers	211 Lake Street	Elmira	NY	14901	16-0767225	501 (c)(3)	$78,246				Program Funding		Program Funding
							$2,886,428						

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

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization	Employer identification number
UNITED WAY OF THE SOUTHERN TIER, INC.	**-***1041

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

IN OUR COMMUNITY.

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

TOTAL, MINUS ADMINISTRATIVE COSTS AND AN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES.

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

THE FINANCE COMMITTEE AND EXECUTIVE COMMITTEE OR BOARD OF DIRECTORS APPROVE FORM 990 PRIOR TO FILING. ALL BOARD MEMBERS RECEIVE A COPY OF FORM 990 BEFORE IT IS FILED.

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

ANNUALLY, BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT AND NOTE ANY POTENTIAL CONFLICTS OF INTEREST TO BE FURTHER EVALUATED BY THE BOARD OF DIRECTORS

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

THE PRESIDENT'S COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS ANNUALLY IN REGULAR BOARD MEETINGS.

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

THE AGENCY MAKES ITS POLICIES, GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE ON THE AGENCY'S WEBSITE AND UPON REQUEST.

FORM 990, PART XII, LINE 2C:

Name of the organization	Employer identification number
UNITED WAY OF THE SOUTHERN TIER, INC.	**-***1041

FORM 990, PART XII, LINE 2C: THE BOARD OF DIRECTORS AND FINANCE COMMITTEE ASSUME RESPONSIBILITY AND OVERSIGHT OF THE AUDIT, AS WELL AS THE SELECTION OF AN INDEPENDENT ACCOUNTANT.

FORM 990 PART X LINE 18

ALLOCATIONS PAYABLE - THE AGENCY'S BOARD OF DIRECTORS HAS ELECTED AN ALLOCATION PAYABLE POLICY TO MAKE ALLOCATION COMMITMENTS TO PARTICIPATING AGENCIES PAYABLE IN THE SUBSEQUENT CAMPAIGN YEAR CONTINGENT UPON THE SUCCESS OF THE SUBSEQUENT YEAR'S CAMPAIGN. EACH YEAR THE BOARD IDENTIFIES FIFTY PERCENT OF ITS FUNDING ALLOCATIONS AS ALLOCATIONS TO BE PAID FROM THE PRECEDING YEAR'S FUNDRAISING EFFORT.

Form **8868**
(Rev. January 2014)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

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

OMB No. 1545-1709

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

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

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

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

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

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. UNITED WAY OF THE SOUTHERN TIER, INC.	Enter filer's identifying number Employer identification number (EIN) or **-***1041
	Number, street, and room or suite no. If a P.O. box, see instructions. 300 NASSER CIVIC CTR PL, NO. 220	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CORNING, NY 14830	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

- The books are in the care of ▶ LISA GILL - 300 NASSER CIVIC CENTER PLAZA, SUITE 220 - CORNING, NY 14830

Telephone No. ▶ 607-936-3753 Fax No. ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

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

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

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

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

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
126	MIP 2ND USER LICENSE	112414	SL	3.00	16	2,695.			2,695.	524.		898.
4	CORNING - KEYBOARD TABLE	121800	SL	7.00	16	1,251.			1,251.	1,251.		0.
5	CORNING - COMPUTER STAND - STELLA	121800	SL	7.00	16	329.			329.	329.		0.
6	CORNING - AVERIER LIGHT	010100	SL	7.00	16	671.			671.	671.		0.
7	CORNING-7 L-FILLER - WORKSTATION	121300	SL	7.00	16	354.			354.	354.		0.
8	CORNING- 3 RECEPTACLES	121300	SL	7.00	16	128.			128.	128.		0.
9	CORNING-3 RECEPTACLES	121300	SL	7.00	16	128.			128.	128.		0.
10	CORNING-3 RECEPTACLES	121300	SL	7.00	16	128.			128.	128.		0.
11	CORNING-4 BASE POWER CONDUIT	121300	SL	7.00	16	164.			164.	164.		0.
12	CORNING-5 T-FILLER WORKSTATION	121300	SL	7.00	16	253.			253.	253.		0.
13	CORNING-3 WALL CHANNELS	121300	SL	7.00	16	43.			43.	43.		0.
14	CORNING-INSTALLATION OF ASSETS #	121300	SL	7.00	16	3,789.			3,789.	3,789.		0.
15	CORNING - WORKSTATION 24X38	121500	SL	7.00	16	343.			343.	343.		0.
16	CORNING - 6 LATERAL 2 DRAWER FILE CABI	121500	SL	7.00	16	1,218.			1,218.	1,218.		0.
17	CORNING - LATRAL 3 DRAWER FILE CABINET	121500	SL	7.00	16	267.			267.	267.		0.
18	CORNING - 7 SHELVES	121500	SL	7.00	16	267.			267.	267.		0.
19	CORNING - 7 PEDESTALS - MOBILE	121500	SL	7.00	16	1,194.			1,194.	1,194.		0.
20	CORNING - 6 OVERHEAD STORAGE BI	121500	SL	7.00	16	556.			556.	556.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
21	CORNING - 9 OVERHEAD STORAGE BI	121500	SL	7.00	16	954.			954.	954.		0.
22	CORNING - 10 LIGHT SHELVES	121500	SL	7.00	16	1,079.			1,079.	1,079.		0.
23	CORNING - 2 LIGHT SHELVES	121500	SL	7.00	16	231.			231.	231.		0.
24	CORNING-PEDESTAL 2 BOX, 1 FILE CABINET	121300	SL	7.00	16	259.			259.	259.		0.
25	CORNING-PEDESTAL MOBILE FILE CABINET	121300	SL	7.00	16	377.			377.	377.		0.
26	CORNING-OVERHEAD CABINETS	121300	SL	7.00	16	483.			483.	483.		0.
27	CORNING-2 LATERAL 2 DRAWER FILE CABINE	121300	SL	7.00	16	802.			802.	802.		0.
28	CORNING-UTILITY TRUNK	121300	SL	7.00	16	54.			54.	54.		0.
29	CORNING-UTILITY TRUNK - 36 W	121300	SL	7.00	16	107.			107.	107.		0.
30	CORNING-4 UTLITY TRUNK 48 W	121300	SL	7.00	16	458.			458.	458.		0.
31	CORNING-COUNTERTOP	121300	SL	7.00	16	198.			198.	198.		0.
32	CORNING-7 LATERAL 2 DRAWER FILE CABINE	121300	SL	7.00	16	1,150.			1,150.	1,150.		0.
33	CORNING-ORK CHARI - HIGH BACK	010301	SL	7.00	16	431.			431.	431.		0.
34	CORNING-RADIUS EDGE WORK SURFACE	021601	SL	7.00	16	179.			179.	179.		0.
35	CORNING-BOAT SHAPED TABLE	122600	SL	7.00	16	1,917.			1,917.	1,917.		0.
36	CORNING-12 GUEST CHAIRS	121300	SL	7.00	16	1,250.			1,250.	1,250.		0.
37	CORNING-COLUMN MOUNTED SHELF PACKA	121300	SL	7.00	16	419.			419.	419.		0.
38	CORNING-SCREEN - CORNER MOUNTED	121300	SL	7.00	16	209.			209.	209.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
39	CORNING-SCREEN - CORNER MOUNTD	121300	SL	7.00	16	105.			105.	105.		0.
40	CORNING-SCREEN - STRAIGHT	121300	SL	7.00	16	101.			101.	101.		0.
41	CORNING-PARTITION BASE	121500	SL	7.00	16	55.			55.	55.		0.
42	CORNING-PARTITION BASE	121500	SL	7.00	16	108.			108.	108.		0.
43	CORNING-15 CONFERENCE ROOM CHA	121500	SL	7.00	16	2,623.			2,623.	2,623.		0.
44	CORNING-WORKSTATION 24 X 36	121500	SL	7.00	16	308.			308.	308.		0.
45	CORNING-WORKSTATION 24 X 48	121500	SL	7.00	16	343.			343.	343.		0.
46	CORNING-2 WORKSTTION SUPPORTS	121500	SL	7.00	16	954.			954.	954.		0.
47	CORNING-3 WORKSTATION BASE PL	121500	SL	7.00	16	59.			59.	59.		0.
48	CORNING-WORKSTATION BASE PLATE	121500	SL	7.00	16	25.			25.	25.		0.
49	CORNING-WORKSTATION - CORE UNIT SUPPOR	121500	SL	7.00	16	572.			572.	572.		0.
50	CORNING-PEDESTAL - 2 DRAWER FILE CABIN	121500	SL	7.00	16	235.			235.	235.		0.
51	CORNING - 7 END PANELS - SUPPORTED	121500	SL	7.00	16	543.			543.	543.		0.
52	CORNING - PEDESTAL WITH FILE DRAWER	121500	SL	7.00	16	126.			126.	126.		0.
53	CORNING - TABLE - PANEL	121500	SL	7.00	16	250.			250.	250.		0.
54	CORNING - 5 TABLE PANELS	121500	SL	7.00	16	1,304.			1,304.	1,304.		0.
55	CORNING - 9 BRACKETS	121500	SL	7.00	16	31.			31.	31.		0.
56	CORNING - 13 CANTILEVERS	121500	SL	7.00	16	286.			286.	286.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
57	CORNING - 1 CANTILEVER	121500	SL	7.00	16	16.			16.	16.		0.
58	CORNING - TOP SHELF 66 L	121500	SL	7.00	16	92.			92.	92.		0.
59	CORNING - TOP SHELF 72 L	121500	SL	7.00	16	108.			108.	108.		0.
60	CORNING-ACOUSTIC PANEL TRACK	121300	SL	7.00	16	218.			218.	218.		0.
61	CORNING-9 STORAGE CABINETS	121300	SL	7.00	16	1,648.			1,648.	1,648.		0.
62	CORNING-3 ACOUSTIC PANEL TRACKS	121300	SL	7.00	16	554.			554.	554.		0.
63	CORNING-ACOUSTIC PANEL TRACK	121300	SL	7.00	16	141.			141.	141.		0.
64	CORNING-9 ACOUSTIC PANEL TRACKS	121300	SL	7.00	16	1,749.			1,749.	1,749.		0.
65	CORNING-9 ACOUSTIC PANEL TRACKS	121300	SL	7.00	16	1,362.			1,362.	1,362.		0.
66	CORNING-4 ACOUSTIC PANEL TRACKS	121300	SL	7.00	16	641.			641.	641.		0.
67	CORNING-13 ACOUSTIC PANLE TRACKS	121300	SL	7.00	16	3,027.			3,027.	3,027.		0.
68	CORNING-15 ACOUSTIC PANEL TRACKS	121300	SL	7.00	16	2,846.			2,846.	2,846.		0.
69	CORNING-8 WORKSURFACES 24 X 4	121500	SL	7.00	16	660.			660.	660.		0.
70	CORNING-2 WORKSURFACES 30 X 5	121500	SL	7.00	16	208.			208.	208.		0.
71	CORNING-2 WORKSURFACES 24 X 7	121500	SL	7.00	16	219.			219.	219.		0.
72	CORNING-9 WORKSURFACES 30 X 7	121500	SL	7.00	16	1,186.			1,186.	1,186.		0.
73	CORNING-SUPPORTED END PANEL	121500	SL	7.00	16	74.			74.	74.		0.
74	CORNING-2 CANTILEVER, L4R	121500	SL	7.00	16	40.			40.	40.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
75	CORNING-BRACKETS FOR END PANEL	121500	SL	7.00	16	50.			50.	50.		0.
76	CORNING-TABLE 30 X 72	121500	SL	7.00	16	427.			427.	427.		0.
77	CORNING-MISC -ATTACHMENT ITEMS.	121500	SL	7.00	16	77.			77.	77.		0.
81	STEELCASE STORAGE UNIT & PEDASTAL	101701	SL	7.00	16	935.			935.	935.		0.
82	STEELCASE - 3 WALL PANELS	101701	SL	7.00	16	510.			510.	510.		0.
91	12 - FOLDING TABLES	053105	SL	7.00	16	767.			767.	767.		0.
	* 990 PAGE 10 TOTAL -					49,918.		0.	49,918.	47,747.	0.	898.
86		081303	SL	5.00	16							0.
87		081303	SL	5.00	16							0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
88		090104	SL	5.00	16							0.
89	SAMSUNG TELEPHONE SYSTEM	030105	SL	5.00	16	4,765.			4,765.	4,765.		0.
90	ANDAR SOFTWARE	011205		36M	43	9,500.			9,500.	9,500.		0.
94	HARD DRIVE FOR VM PHONE SYSTEM	010306	SL	5.00	16	1,857.			1,857.	1,857.		0.
98	ANDAR LICENSE FEES	081805	SL	3.00	16	4,500.			4,500.	4,500.		0.
99	ANDAR LICENSE FEES	072606		36M	43	5,250.			5,250.	5,250.		0.
103	PAPER SHREDDER	113006	SL	5.00	16	906.			906.	906.		0.
104	PAPER FOLDER	113006	SL	5.00	16	1,407.			1,407.	1,407.		0.
106	MIP FUND ACCOUNTING SOFTWARE	042507		36M	43	3,490.			3,490.	3,490.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
107	LASER JET PRINTER	052107	SL	5.00	16	1,310.			1,310.	1,310.		0.
109	LASER PRINTER	111207	SL	3.00	16	1,260.			1,260.	1,260.		0.
111	ANDAR MODULE	041201	SL	3.00	16	7,375.			7,375.	7,375.		0.
112	ANDAR LICENSE FEES	042011	SL	3.00	16	2,400.			2,400.	2,400.		0.
113	DELL COMPUTER - XPS 9100	011411	SL	3.00	16	1,009.			1,009.	1,009.		0.
114	OFFICE PRO	011311	SL	3.00	16	705.			705.	705.		0.
115	DELL COMPUTER - INSPIRON 15R	011711	SL	3.00	16	3,283.			3,283.	3,283.		0.
116	ANDAR MODULE - EXECUTIVE PLUS	022212	SL	3.00	16	1,000.			1,000.	1,000.		0.
117	PLEDGE MODULE - ANDAR 360 - E-PLEDG	092012	SL	5.00	16	5,000.			5,000.	2,750.		1,000.
118	DELL COMP 00186-193-949-754 -	110512	SL	5.00	16	1,268.			1,268.	677.		254.
119	DELL COMP 00186-193-657-275 -	110512	SL	5.00	16	1,268.			1,268.	677.		254.
120	DELL PROJECTOR 54NJ1S1	110512	SL	5.00	16	894.			894.	477.		179.
121	PLEDGE MODULE - CREDIT CARD & ACH P	031513	SL	5.00	16	8,800.			8,800.	4,107.		1,760.
122	DELL COMPUTER	081513	SL	3.00	16	750.			750.	458.		250.
123	DELL COMPUTER	081513	SL	3.00	16	750.			750.	458.		250.
124	DELL COMPUTER	120213	SL	3.00	16	893.			893.	472.		298.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2015 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
125	DELL LAPTOP - 15" & RAM	123113	SL	3.00	16	1,086.			1,086.	543.		362.
	* 990 PAGE 10 TOTAL -					70,726.		0.	70,726.	60,636.	0.	4,607.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMOR					120,644.		0.	120,644.	108,383.	0.	5,505.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

- NEXT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
126	MIP 2ND USER LICENSE	112414	SL	3.00	2,695.		2,695.	1,422.	898.
4	CORNING - KEYBOARD TABLE	121800	SL	7.00	1,251.		1,251.	1,251.	0.
5	CORNING - COMPUTER STAND - STELLA	121800	SL	7.00	329.		329.	329.	0.
6	CORNING - AVERIER LIGHT	010100	SL	7.00	671.		671.	671.	0.
7	CORNING-7 L-FILLER - WORKSTATION	121300	SL	7.00	354.		354.	354.	0.
8	CORNING- 3 RECEPTACLES	121300	SL	7.00	128.		128.	128.	0.
9	CORNING-3 RECEPTACLES	121300	SL	7.00	128.		128.	128.	0.
10	CORNING-3 RECEPTACLES	121300	SL	7.00	128.		128.	128.	0.
11	CORNING-4 BASE POWER CONDUIT	121300	SL	7.00	164.		164.	164.	0.
12	CORNING-5 T-FILLER WORKSTATION	121300	SL	7.00	253.		253.	253.	0.
13	CORNING-3 WALL CHANNELS	121300	SL	7.00	43.		43.	43.	0.
14	CORNING-INSTALLATION OF ASSETS #	121300	SL	7.00	3,789.		3,789.	3,789.	0.
15	CORNING - WORKSTATION 24X38	121500	SL	7.00	343.		343.	343.	0.
16	CORNING - 6 LATERAL 2 DRAWER FILE CABINET	121500	SL	7.00	1,218.		1,218.	1,218.	0.
17	CORNING - LATRAL 3 DRAWER FILE CABINET	121500	SL	7.00	267.		267.	267.	0.
18	CORNING - 7 SHELVES	121500	SL	7.00	267.		267.	267.	0.
19	CORNING - 7 PEDESTALS - MOBILE	121500	SL	7.00	1,194.		1,194.	1,194.	0.
20	CORNING - 6 OVERHEAD STORAGE BINS	121500	SL	7.00	556.		556.	556.	0.
21	CORNING - 9 OVERHEAD STORAGE BINS	121500	SL	7.00	954.		954.	954.	0.
22	CORNING - 10 LIGHT SHELVES	121500	SL	7.00	1,079.		1,079.	1,079.	0.
23	CORNING - 2 LIGHT SHELVES	121500	SL	7.00	231.		231.	231.	0.
24	CORNING-PEDESTAL 2 BOX, 1 FILE CABINET	121300	SL	7.00	259.		259.	259.	0.
25	CORNING-PEDESTAL MOBILE FILE CABINET	121300	SL	7.00	377.		377.	377.	0.
26	CORNING-OVERHEAD CABINETS	121300	SL	7.00	483.		483.	483.	0.
27	CORNING-2 LATERAL 2 DRAWER FILE CABINET	121300	SL	7.00	802.		802.	802.	0.
28	CORNING-UTILITY TRUNK	121300	SL	7.00	54.		54.	54.	0.
29	CORNING-UTILITY TRUNK - 36 W	121300	SL	7.00	107.		107.	107.	0.
30	CORNING-4 UTLITY TRUNK 48 W	121300	SL	7.00	458.		458.	458.	0.
31	CORNING-COUNTERTOP	121300	SL	7.00	198.		198.	198.	0.

(D) - Asset disposed * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
32	CORNING-7 LATERAL 2 DRAWER FILE CABINET	121300	SL	7.00	1,150.		1,150.	1,150.	0.
33	CORNING-ORK CHARI - HIGH BACK	010301	SL	7.00	431.		431.	431.	0.
34	CORNING-RADIUS EDGE WORK SURFACE	021601	SL	7.00	179.		179.	179.	0.
35	CORNING-BOAT SHAPED TABLE	122600	SL	7.00	1,917.		1,917.	1,917.	0.
36	CORNING-12 GUEST CHAIRS	121300	SL	7.00	1,250.		1,250.	1,250.	0.
37	CORNING-COLUMN MOUNTED SHELF PACKAGE	121300	SL	7.00	419.		419.	419.	0.
38	CORNING-SCREEN - CORNER MOUNTED	121300	SL	7.00	209.		209.	209.	0.
39	CORNING-SCREEN - CORNER MOUNTD	121300	SL	7.00	105.		105.	105.	0.
40	CORNING-SCREEN - STRAIGHT	121300	SL	7.00	101.		101.	101.	0.
41	CORNING-PARTITION BASE	121500	SL	7.00	55.		55.	55.	0.
42	CORNING-PARTITION BASE	121500	SL	7.00	108.		108.	108.	0.
43	CORNING-15 CONFERENCE ROOM CHAIRS	121500	SL	7.00	2,623.		2,623.	2,623.	0.
44	CORNING-WORKSTATION 24 X 36	121500	SL	7.00	308.		308.	308.	0.
45	CORNING-WORKSTATION 24 X 48	121500	SL	7.00	343.		343.	343.	0.
46	CORNING-2 WORKSTTION SUPPORTS	121500	SL	7.00	954.		954.	954.	0.
47	CORNING-3 WORKSTATION BASE PLATE	121500	SL	7.00	59.		59.	59.	0.
48	CORNING-WORKSTATION BASE PLATE	121500	SL	7.00	25.		25.	25.	0.
49	CORNING-WORKSTATION - CORE UNIT SUPPORTS	121500	SL	7.00	572.		572.	572.	0.
50	CORNING-PEDESTAL - 2 DRAWER FILE CABINET	121500	SL	7.00	235.		235.	235.	0.
51	CORNING - 7 END PANELS - SUPPORTED	121500	SL	7.00	543.		543.	543.	0.
52	CORNING - PEDESTAL WITH FILE DRAWER	121500	SL	7.00	126.		126.	126.	0.
53	CORNING - TABLE - PANEL	121500	SL	7.00	250.		250.	250.	0.
54	CORNING - 5 TABLE PANELS	121500	SL	7.00	1,304.		1,304.	1,304.	0.
55	CORNING - 9 BRACKETS	121500	SL	7.00	31.		31.	31.	0.
56	CORNING - 13 CANTILEVERS	121500	SL	7.00	286.		286.	286.	0.
57	CORNING - 1 CANTILEVER	121500	SL	7.00	16.		16.	16.	0.
58	CORNING - TOP SHELF 66 L	121500	SL	7.00	92.		92.	92.	0.
59	CORNING - TOP SHELF 72 L	121500	SL	7.00	108.		108.	108.	0.
60	CORNING-ACOUSTIC PANEL TRACK	121300	SL	7.00	218.		218.	218.	0.
61	CORNING-9 STORAGE CABINETS	121300	SL	7.00	1,648.		1,648.	1,648.	0.
62	CORNING-3 ACOUSTIC PANEL TRACKS	121300	SL	7.00	554.		554.	554.	0.

(D) - Asset disposed * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
63	CORNING-ACOUSTIC PANEL TRACK	121300	SL	7.00	141.		141.	141.	0.
64	CORNING-9 ACOUSTIC PANEL TRACKS	121300	SL	7.00	1,749.		1,749.	1,749.	0.
65	CORNING-9 ACOUSTIC PANEL TRACKS	121300	SL	7.00	1,362.		1,362.	1,362.	0.
66	CORNING-4 ACOUSTIC PANEL TRACKS	121300	SL	7.00	641.		641.	641.	0.
67	CORNING-13 ACOUSTIC PANLE TRACKS	121300	SL	7.00	3,027.		3,027.	3,027.	0.
68	CORNING-15 ACOUSTIC PANEL TRACKS	121300	SL	7.00	2,846.		2,846.	2,846.	0.
69	CORNING-8 WORKSURFACES 24 X 48	121500	SL	7.00	660.		660.	660.	0.
70	CORNING-2 WORKSURFACES 30 X 54	121500	SL	7.00	208.		208.	208.	0.
71	CORNING-2 WORKSURFACES 24 X 72	121500	SL	7.00	219.		219.	219.	0.
72	CORNING-9 WORKSURFACES 30 X 72	121500	SL	7.00	1,186.		1,186.	1,186.	0.
73	CORNING-SUPPORTED END PANEL	121500	SL	7.00	74.		74.	74.	0.
74	CORNING-2 CANTILEVER, L4R	121500	SL	7.00	40.		40.	40.	0.
75	CORNING-BRACKETS FOR END PANEL	121500	SL	7.00	50.		50.	50.	0.
76	CORNING-TABLE 30 X 72	121500	SL	7.00	427.		427.	427.	0.
77	CORNING-MISC -ATTACHMENT ITEMS.	121500	SL	7.00	77.		77.	77.	0.
81	STEELCASE STORAGE UNIT & PEDASTAL	101701	SL	7.00	935.		935.	935.	0.
82	STEELCASE - 3 WALL PANELS	101701	SL	7.00	510.		510.	510.	0.
91	12 - FOLDING TABLES	053105	SL	7.00	767.		767.	767.	0.
	* 990 PAGE 10 TOTAL -				49,918.		49,918.	48,645.	898.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
				.000					0.
86		081303	SL	5.00					0.
87		081303	SL	5.00					0.
88		090104	SL	5.00					0.
89	SAMSUNG TELEPHONE SYSTEM	030105	SL	5.00	4,765.		4,765.	4,765.	0.
90	ANDAR SOFTWARE	011205		36M	9,500.		9,500.	9,500.	0.
				.000					0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -   UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
				.000					0.
94	HARD DRIVE FOR VM PHONE SYSTEM	010306	SL	5.00	1,857.		1,857.	1,857.	0.
				.000					0.
				.000					0.
				.000					0.
98	ANDAR LICENSE FEES	081805	SL	3.00	4,500.		4,500.	4,500.	0.
99	ANDAR LICENSE FEES	072606		36M	5,250.		5,250.	5,250.	0.
				.000					0.
				.000					0.
				.000					0.
103	PAPER SHREDDER	113006	SL	5.00	906.		906.	906.	0.
104	PAPER FOLDER	113006	SL	5.00	1,407.		1,407.	1,407.	0.
				.000					0.
106	MIP FUND ACCOUNTING SOFTWARE	042507		36M	3,490.		3,490.	3,490.	0.
107	LASER JET PRINTER	052107	SL	5.00	1,310.		1,310.	1,310.	0.
				.000					0.
109	LASER PRINTER	111207	SL	3.00	1,260.		1,260.	1,260.	0.
				.000					0.
111	ANDAR MODULE	041201	SL	3.00	7,375.		7,375.	7,375.	0.
112	ANDAR LICENSE FEES	042011	SL	3.00	2,400.		2,400.	2,400.	0.
113	DELL COMPUTER - XPS 9100	011411	SL	3.00	1,009.		1,009.	1,009.	0.
114	OFFICE PRO	011311	SL	3.00	705.		705.	705.	0.
115	DELL COMPUTER - INSPIRON 15R	011711	SL	3.00	3,283.		3,283.	3,283.	0.
116	ANDAR MODULE - EXECUTIVE PLUS	022212	SL	3.00	1,000.		1,000.	1,000.	0.
	PLEDGE MODULE - ANDAR 360 - E-PLEDGE								
117	MODULE	092012	SL	5.00	5,000.		5,000.	3,750.	1,000.
118	DELL COMP 00186-193-949-754 - SHELLY	110512	SL	5.00	1,268.		1,268.	931.	254.
	DELL COMP 00186-193-657-275 -								
119	KRISTIN	110512	SL	5.00	1,268.		1,268.	931.	254.
120	DELL PROJECTOR 54NJ1S1	110512	SL	5.00	894.		894.	656.	179.
	PLEDGE MODULE - CREDIT CARD & ACH								
121	PROCESSOR	031513	SL	5.00	8,800.		8,800.	5,867.	1,760.
122	DELL COMPUTER	081513	SL	3.00	750.		750.	708.	42.
123	DELL COMPUTER	081513	SL	3.00	750.		750.	708.	42.

528103
04-01-15

(D) - Asset disposed   * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - UNITED WAY OF THE SOUTHERN TIER, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
124	DELL COMPUTER	120213	SL	3.00	893.		893.	770.	123.
125	DELL LAPTOP - 15" & RAM	123113	SL	3.00	1,086.		1,086.	905.	181.
	* 990 PAGE 10 TOTAL -				70,726.		70,726.	65,243.	3,835.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT				120,644.		120,644.	113,888.	4,733.

528103
04-01-15

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271

2015

Open to Public Inspection

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 07/01/2015 and Ending (mm/dd/yyyy) 06/30/2016

Check if Applicable:	Name of Organization:	Employer Identification Number (EIN):
☐ Address Change	UNITED WAY OF THE SOUTHERN TIER, INC.	**-***1041
☐ Name Change ☐ Initial Filing	Mailing Address: 300 NASSER CIVIC CTR PL, NO. 220	NY Registration Number: 05-34-99
☐ Final Filing ☐ Amended Filing	City / State / ZIP: CORNING, NY 14830	Telephone: 607 936-3753
☐ Reg ID Pending	Website: WWW.UWST.ORG	Email:

Check your organization's registration category: ☐ 7A only ☐ EPTL only ☒ DUAL (7A & EPTL) ☐ EXEMPT

Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer: STEPHEN HUGHES PRESIDENT

Signature Print Name and Title Date

Chief Financial Officer or Treasurer: LISA GILL FINANCE DIRECTOR

Signature Print Name and Title Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

☐ 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc, did not exceed $25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year. Or the organization qualifies for another 7A exemption (see instructions).

☐ 3b. EPTL filing exemption: Gross receipts did not exceed $25,000 and the market value of assets did not exceed $25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

☐ Yes ☒ No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

☐ Yes ☒ No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee:	EPTL filing fee:	Total fee:	Make a single check or money order payable to:
	$ 25.	$ 250.	$ 275.	**"Department of Law"**

CHAR500 Annual Filing Checklist	Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF: - Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3. - Your organization is registered as EPTL only and marked the EPTL filing exemption in Part 3. - Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

☐ If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)

☐ If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

[X] IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable

[X] All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors).

☐ Our organization was eligible for and filed an IRS 990-N e-postcard. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

☐ Review Report if you received total revenue and support greater than $250,000 and up to $500,000.

[X] Audit Report if you received total revenue and support greater than $500,000

☐ No Review Report or Audit Report is required because total revenue and support is less than $250,000

☐ We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

☐ $0, if you checked the 7A exemption in Part 3a

[X] $25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

☐ $0, if you checked the EPTL exemption in Part 3b

☐ $25, if the NET WORTH is less than $50,000

☐ $50, if the NET WORTH is $50,000 or more but less than $250,000

☐ $100, if the NET WORTH is $250,000 or more but less than $1,000,000

[X] $250, if the NET WORTH is $1,000,000 or more but less than $10,000,000

☐ $750, if the NET WORTH is $10,000,000 or more but less than $50,000,000

☐ $1500, if the NET WORTH is $50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS From 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).