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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2008

For the 2008 calendar year, or tax year beginning **4/01**, 2008, and ending **3/31**, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Please use IRS label or print or type. See specific instructions. UNITED WAY OF MOWER COUNTY INC. PO BOX 605 AUSTIN, MN 55912	D Employer Identification Number 41-0831896
F Name and address of principal officer: MANDI LIGHTHIZER-SCHMIDT SAME AS C ABOVE		E Telephone number 507-437-2313	G Gross receipts \$ 1,230,755.
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list. (see instructions)	
J Website: WWW.UWMOWER.ORG		H(c) Group exemption number	
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of Formation: 1958	M State of legal domicile: MN

Summary	
1 Briefly describe the organization's mission or most significant activities: TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF COMMUNITIES.	
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
3 Number of voting members of the governing body (Part VI, line 1a)	14
4 Number of independent voting members of the governing body (Part VI, line 1b)	14
5 Total number of employees (Part V, line 2a)	4
6 Total number of volunteers (estimate if necessary)	192
7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	0.
7b Net unrelated business taxable income from Form 990-T, line 34	0.
Revenue	
8 Contributions and grants (Part VIII, line 1h)	Prior Year 926,032. Current Year 1,210,238.
9 Program service revenue (Part VIII, line 2g)	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	22,810. 12,391.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,245. 8,126.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	957,087. 1,230,755.
Expenses	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	967,981.
14 Benefits paid to or for members (Part IX, column (A), line 4)	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	86,745. 98,821.
16a Professional fundraising fees (Part IX, column (A), line 11e)	
b Total fundraising expenses (Part IX, column (D), line 25) 35,701.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	796,332. 110,413.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	883,077. 1,177,215.
19 Revenue less expenses. Subtract line 18 from line 12	74,010. 53,540.
Not Assets or Fund Balances	
20 Total assets (Part X, line 16)	Beginning of Year 1,199,065. End of Year 1,255,047.
21 Total liabilities (Part X, line 26)	506,315. 508,757.
22 Net assets or fund balances. Subtract line 21 from line 20	692,750. 746,290.

Signature Block			
Sign Here	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.		
	Mandi Lighthizer-Schmidt 5/25/2010 Signature of officer Date MANDI LIGHTHIZER-SCHMIDT EXECUTIVE DIRECTOR Type or print name and title		
Paid Preparer's Use Only	Preparer's signature GREG A LARSON	Date 5/24/10	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 HILL, LARSON, WALTH & BENDA, P.A. 326 NORTH MAIN STREET AUSTIN, MN 55912-3406		Preparer's identifying number (see instructions) N/A
	EIN N/A		Phone no. (507) 433-2264
	May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

SCANNED JAN 28 2011

✓-A
g/b
6

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF COMMUNITIES.2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O

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

If 'Yes,' describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 1,040,081. including grants of \$ 967,981.) (Revenue \$)PROMOTION OF THE PUBLIC WELFARE WITH THE COOPERATION OF AND FOR THE BENEFIT OF QUALIFIED VOLUNTARY AGENCIES AND TO MAKE EQUITABLE DIVISION OF DISTRIBUTION OF FUNDS RECEIVED.4b (Code:) (Expenses \$ 35,222. including grants of \$) (Revenue \$)THE SUCCESS BY 6 PROGRAM IS COMPRISED OF PRE-SCHOOL SCHOLARSHIPS AND TRANSPORTATION. UNITED WAY THROUGH A GRANT FROM THE HORMEL FOUNDATION GIVE SCHOLARSHIPS TO ATTEND PRE-SCHOOL TO CHILDREN WHOSE FAMILIES INCOME ARE LESS THAN 200% OF POVERTY. SCHOLARSHIPS INCLUDE A FULL YEAR OF TUITION TO A LOCAL PARTICIPATING PRE-SCHOOL PROGRAM AS WELL AS TRANSPORTATION. UNITED WAY ALSO PARTNERS WITH AMCAT TO PROVIDE TRANSPORTATION FOR SCHOLARSHIP CHILDREN AND NON-SCHOLARSHIP CHILDREN TO AND FROM PRE-SCHOOL PROGRAMS. UNITED WAY SUBCONTRACTS WITH THE PARENTING RESOURCE CENTER TO PROVIDE AIDES TO RIDE BUSES AND ENSURE THE SAFETY OF ALL CHILDREN. FOR THE YEAR ENDING MARCH 31, 2009 UNITED WAY PROVIDED NINETEEN (19) SCHOLARSHIPS SO THAT CHILDREN COULD ENTER KINDERGARTEN READY TO SUCCEED.4c (Code:) (Expenses \$ 4,045. including grants of \$) (Revenue \$)THE GET FIT HEALTHY LIVING CHALLENGE IS UNITED WAY OF MOWER COUNTY'S HEALTHY LIVING INITIATIVE. PARTICIPANTS PAY A \$10 FEE TO PARTICIPATE AND FORM TEAMS TO CHANGE UNHEALTHY BEHAVIORS. PARTICIPANTS ARE CHALLENGED TO LOSE WEIGHT, GET THEIR DAILY REQUIREMENTS OF FRUITS AND VEGETABLES AND EXERCISE ON A REGULAR BASIS. EDUCATIONAL AND FITNESS SEMINARS AND SPECIAL EVENTS AROUND HEALTHY LIFESTYLE TOPICS ARE PROVIDED TO PARTICIPANTS AND THE GENERAL PUBLIC. UNITED WAY'S WEBSITE IS A RESOURCE FOR INFORMATION, RECIPES, FITNESS TIPS, ETC. IN 2008 693 COMMUNITY MEMBERS PARTICIPATED IN THE GET FIT CHALLENGE AND LOST OVER 2,000 POUNDS.

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)4e Total program service expenses ▶ \$ 1,079,348. (Must equal Part IX, Line 25, column (B))

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where 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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; 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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J		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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee.		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV.	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV.	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? 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, Parts II, III, IV, and V, line 1.	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2.	35	X
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

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Form 990 (2008)

Part VII Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable	1a 0		
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		
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 4		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b X		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' 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 the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
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 question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	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, during the year, 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 For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make any 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 other 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		

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Form 990 (2008)

Part VII Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1 a Enter the number of voting members of the governing body	14	
1 b Enter the number of voting members that are independent	14	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? SEE SCH O.	X	
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders? SEE SCHEDULE O.	X	
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? SEE SCHEDULE O	X	
7 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990. SEE SCHEDULE O	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.		X

Section B. Policies

	Yes	No
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers of key employees of the organization? SEE SCHEDULE O Describe the process in Schedule O. (see instructions)	X	
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ▶ MANDI LIGHTHIZER-SCHMIDT PO BOX 605 AUSTIN MN 55912 507-437-2313

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
TRISH WIECHMANN PRESIDENT	1	X		X				0.	0.	0.
DARRYL MICKELSEN VICE PRESIDENT	1	X		X				0.	0.	0.
BOB COOPER TREASURER	1	X		X				0.	0.	0.
DIANE BAKER SECRETARY	1	X		X				0.	0.	0.
BECKY RECTOR COMM. INV. CHAIR	1	X		X				0.	0.	0.
JAYNEE SHERMAN BOARD MEMBER	1	X						0.	0.	0.
CATHY HIRST BOARD MEMBER	1	X						0.	0.	0.
ANN HOKANSON BOARD MEMBER	1	X						0.	0.	0.
KELLY LADY BOARD MEMBER	1	X						0.	0.	0.
JEFF LINKOUS BOARD MEMBER	1	X						0.	0.	0.
CLAUDE PULLIAM BOARD MEMBER	1	X						0.	0.	0.
KRISTI STASI BOARD MEMBER	1	X						0.	0.	0.
CHAD SAYLES BOARD MEMBER	1	X						0.	0.	0.
CAROL HOLTZ BOARD MEMBER	1	X						0.	0.	0.
MANDI LIGHTHIZER-SCHMIDT EXECUTIVE DIREC	45			X				49,747.	0.	1,250.

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. 1 a 1,210,238.				
	b Membership dues. 1 b				
	c Fundraising events. 1 c				
	d Related organizations. 1 d				
	e Government grants (contributions). 1 e				
	f All other contributions, gifts, grants, and similar amounts not included above. 1 f				
	g Noncash contrbns included in lns 1a-1f. \$				
	h Total. Add lines 1a-1f 1,210,238.				
PROGRAM SERVICE REVENUE	2 a Business Code				
	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) 12,391.			
4 Income from investment of tax-exempt bond proceeds					
5 Royalties.					
6 a Gross Rents (i) Real (ii) Personal					
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other					
b Less: cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)					
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
b Less: direct expenses b					
c Net income or (loss) from fundraising events					
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 OTHER REVENUE 900099 226.				226.	
b DIRECTORS FEES 900099 7,900.				7,900.	
c					
d All other revenue					
e Total. Add lines 11a-11d 8,126.					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 1,230,755.		0.	0.	20,517.	

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	967,981.	967,981.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	50,128.	15,038.	30,077.	5,013.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	40,558.	27,838.	9,800.	2,920.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	1,250.	375.	750.	125.
10 Payroll taxes	6,885.	3,305.	3,029.	551.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	5,225.		5,225.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	16,915.	6,765.	5,075.	5,075.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,911.	1,563.	1,174.	1,174.
23 Insurance	2,510.	1,004.	753.	753.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>SUCCESS BY SIX PROGRAM EXPENSE</u>	35,222.	35,222.		
b <u>DUES AND SUBSCRIPTIONS</u>	10,328.	4,132.	3,098.	3,098.
c <u>CAMPAIGN AND AWARDS</u>	9,658.			9,658.
d <u>MARKETING EXPENSE</u>	8,296.	4,148.		4,148.
e <u>GET FIT PROGRAM EXPENSES</u>	4,045.	4,045.		
f All other expenses	14,303.	7,932.	3,185.	3,186.
25 Total functional expenses. Add lines 1 through 24f	1,177,215.	1,079,348.	62,166.	35,701.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	45,629.	1	14,580.
	2 Savings and temporary cash investments	511,053.	2	577,295.
	3 Pledges and grants receivable, net	632,972.	3	657,672.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis	15,671.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10,171.		
	11 Investments — publicly-traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,199,065.	16	1,255,047.	
LIABILITIES	17 Accounts payable and accrued expenses	3,473.	17	
	18 Grants payable	502,016.	18	508,757.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 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		24	
	25 Other liabilities. Complete Part X of Schedule D	826.	25	
	26 Total liabilities. Add lines 17 through 25	506,315.	26	508,757.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	398,168.	27	408,241.
	28 Temporarily restricted net assets	294,582.	28	338,049.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	692,750.	33	746,290.
	34 Total liabilities and net assets/fund balances.	1,199,065.	34	1,255,047.

Part XI Financial Statements and Reporting1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If 'Yes' to 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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If 'Yes,' did the organization undergo the required audit or audits?

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

BAA

Form 990 (2008)

Part III 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	1,010,776.	1,047,659.	1,068,513.	1,204,292.	1,210,328.	5,541,568.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-3	1,010,776.	1,047,659.	1,068,513.	1,204,292.	1,210,328.	5,541,568.
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).						2,154,835.
6 Public support. Subtract line 5 from line 4						3,386,733.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1,010,776.	1,047,659.	1,068,513.	1,204,292.	1,210,328.	5,541,568.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,069.	7,663.	17,068.	22,810.	12,391.	65,001.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.) SEE PART IV.	4,866.	6,402.	10,223.	8,245.	8,126.	37,862.
11 Total support. Add lines 7 through 10						5,644,431.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

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 2008 (line 6, column (f) divided by line 11, column (f))	14	60.0 %
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	98.3 %

16a **33-1/3 support test – 2008.** If the organization did not check the box on line 13, and the 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 – 2007.** 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 – 2008.** 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

b **10%-facts-and-circumstances test – 2007.** 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 IV 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 ☐

BAA

Schedule A (Form 990 or 990-EZ) 2008

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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 1-5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 IV.)						
13 Total support. (add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Attach to Form 990. To be completed by organizations that
answered 'Yes' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part III Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-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 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	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year \blacktriangleright _____

4 Number of states where property subject to conservation easement is located \blacktriangleright _____

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

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year \blacktriangleright _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year \blacktriangleright \$ _____

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

9 In Part XIV, 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' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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 the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1	\blacktriangleright \$ _____
(ii) Assets included in Form 990, Part X	\blacktriangleright \$ _____

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 relating to these items

a Revenues included in Form 990, Part VIII, line 1	\blacktriangleright \$ _____
b Assets included in Form 990, Part X	\blacktriangleright \$ _____

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

3 Using the organization's 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 XIV.

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 Trust, Escrow and Custodial Arrangements Complete if organization answered 'Yes' to 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 XIV 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? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment %
 b Permanent endowment %
 c Term endowment %

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

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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

Part VI Investments—Land, Buildings, and Equipment See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		15,521.	10,021.	5,500.
e Other		150.	150.	0.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				5,500.

BAA

Schedule D (Form 990) 2008

Part XIII Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,230,755.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,177,215.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	53,540.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	53,540.

Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	945,407.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	945,407.
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 XIV) SEE PART XIV	4b	285,348.
c	Add lines 4a and 4b	4c	285,348.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,230,755.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	891,867.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	891,867.
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 XIV) SEE PART XIV	4b	285,348.
c	Add lines 4a and 4b	4c	285,348.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	1,177,215.

Part XIV Supplemental Information

Complete this part to 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; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

**Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.**

2008

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

Employer identification number

410831896

SECRET

☒ Yes ☐ No

2

[illegible]

34

$$\frac{54}{2}$$

Schedule I (Form 990) 2008

TEFA3901L 12/19/08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

EXPLANATION OF AMENDED RETURN

CORRECTIONS HAVE BEEN MADE AS FOLLOWS:

990 PAGE 1 LINE 1 DESCRIPTION WAS UPDATED.

990 PAGE 1 LINES 3 AND 4 CORRECTED NUMBER OF VOTING MEMBERS.

990 PAGE 1 LINES 8 AND 13 CORRECTED TO INCLUDE PASS THROUGH GRANTS.

990 PAGE 2 LINE 4A CORRECTED EXPENSES AND GRANTS FOR PASS THROUGH.

990 PAGE 3 LINE 21 CORRECTED ANSWER.

990 PAGE 6 LINES 1A AND 1B CORRECT NUMBER OF VOTING MEMBERS.

990 PAGE 6 LINES 6 AND 7A CORRECT ANSWER.

990 PAGE 6 LINE 18 CHECKED BOX RELATED TO OWN WEBSITE.

990 PAGE 7 LINE 1A SECTIONS (C), (D) AND (F).

990 PAGE 8 LINE 1B TOTALS CHANGED DUE TO CORRECTION ABOVE.

990 PAGE 9 LINES 1A, 1F TO MOVE LINE 1F TO LINE 1A AND ADD
PASS THROUGH GRANTS.

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

EXPLANATION OF AMENDED RETURN (CONTINUED)

990 PAGE 9 LINE 11A AND 11B ADD BUSINESS CODES.

990 PAGE 10 LINE 1 MOVE AMOUNT FROM 24A AND ADD PASS THROUGH GRANTS.

990 PAGE 10 LINE 8 MOVE AMOUNTS FROM LINE 9 TO LINE 8.

SCHEDULE A. PAGE 2 CORRECTED AMOUNT IN COLUMN (E) FOR LINES 1 AND 7.

NOW INCLUDES PASS THROUGH GRANTS.

SCHEDULE A PAGE 2 COLUMN (F) AMOUNTS CORRECTED FOR CHANGE ABOVE.

SCHEDULE B NUMBER 1 INCLUDED PASS THROUGH GRANTS.

SCHEDULE B NUMBERS 3, 6, 7, 8, 9, 10, 11, 12 ADDED EMPLOYER CONTRIBUTIONS

FOR AMOUNTS DEDUCTED FROM EMPLOYEE PAYROLL

DEDUCTIONS.

SCHEDULE D PAGE 4 LINES 4B OF PART XII AND PART XIII. PASS THROUGH
GRANTS.

ADDED SCHEDULE I

SCHEDULE O UPDATED ANSWERS.

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS

ON FEBRUARY 26, 2009 UNITED WAY OF MOWER COUNTY'S BOARD OF DIRECTORS APPROVED NEW

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS (C)

CONFLICT OF INTEREST AND RECORD RETENTION POLICIES. BOTH POLICIES WERE ALREADY IN PLACE, BUT THE NEW POLICIES ARE MORE DETAILED AND IN LINE WITH THE MN COUNCIL OF NONPROFIT'S RECOMMENDATIONS.

ON FEBRUARY 26, 2009 UNITED WAY OF MOWER COUNTY'S BOARD OF DIRECTORS APPROVED A WHISTLEBLOWER POLICY. THIS NEW POLICY IS IN LINE WITH THE MN COUNCIL OF NONPROFITS' RECOMMENDATIONS.

ALL POLICIES ARE AVAILABLE ON UNITED WAY'S WEBSITE AND BY REQUEST.

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

AS STATED IN UNITED WAY OF MOWER COUNTY'S BY-LAWS "ANY INDIVIDUAL OR BUSINESS WHO MAKES A CONTRIBUTION FOR THE CURRENT YEAR IS A MEMBER OF THE ORGANIZATION."

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

AS STATED IN UNITED WAY OF MOWER COUNTY'S BY-LAWS "ALL MEMBERS OF UNITED WAY OF MOWER COUNTY SHALL BE INVITED TO ATTEND THE ANNUAL MEETING. EACH MEMBER ATTENDING THE ANNUAL MEETING IS ENTITLED TO ONE VOTE ON MATTERS TO BE VOTED ON BY MEMBERS. THERE SHALL BE NO VOTING BY PROXY. A MAJORITY OF MEMBERS PRESENT AND VOTING ON ANY PARTICULAR ISSUE SHALL CONSTITUTE THE ACT OF THE MEMBERS, EXCEPT THAT A PLURALITY VOTE SHALL BE CONSIDERED SUFFICIENT TO ELECT PERSONS TO THE BOARD OF DIRECTORS IN CONTESTED ELECTIONS. THE ANNUAL MEETING OF THE UNITED WAY OF MOWER COUNTY SHALL BE HELD ON THE SECOND TUESDAY OF APRIL. THE AGENDA INCLUDES THE ANNUAL REPORT AND ELECTION OF NEW BOARD MEMBERS."

FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS

THE BOARD OF DIRECTORS WILL REVIEW THE 990 AND SUPPORTING SCHEDULES TO BE SURE THE 990 IS AS ACCURATE AS POSSIBLE PRIOR TO FILING THE RETURN.

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C

CONFLICTS OF INTEREST ARE HANDLED INTERNALLY ON AN ON-GOING BASIS. EACH YEAR AT THE FIRST MEETING AFTER THE ANNUAL MEETING ALL BOARD MEMBERS AND STAFF ARE REQUIRED TO SIGN A NEW CONFLICT OF INTEREST AS WELL AS PUBLICLY DECLARE CONFLICT OF INTEREST SO THEY MAY BE NOTED IN THE BOARD MINUTES. BOARD MEMBERS ARE ENCOURAGED TO DECLARE CONFLICTS OF INTEREST THROUGHOUT THE YEAR AS THEY MAY ARISE. WHEN A CONFLICT OF INTEREST IS DECLARED IT IS ENTERED INTO THE BOARD MINUTES AND BOARD MEMBERS ABSTAIN FROM VOTING ON THE ISSUE WHERE THEY HAVE A CONFLICT OF INTEREST. THE ABSTENTION IS ALSO NOTED IN THE BOARD MINUTES.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEE:

UNITED WAY OF MOWER COUNTY KEEPS A POLICY ON THE PROCESS FOR DETERMINING COMPENSATION. A FORMAL PERFORMANCE EVALUATION IS CONDUCTED FOR ALL STAFF (EXECUTIVE DIRECTOR, ADMINISTRATIVE ASSISTANT AND MARKETING COORDINATOR). THE EXECUTIVE DIRECTOR PERFORMS STAFF EVALUATIONS AND MAKES A RECOMMENDATION TO THE EXECUTIVE COMMITTEE ON COMPENSATION. THE EXECUTIVE DIRECTOR USES PERFORMANCE EVALUATION INFORMATION AND DATA AS TO COMPARABLE COMPENSATION PROVIDED BY UNITED WAY WORLDWIDE AND UNITED WAYS OF MN STATE ASSOCIATION TO FORM THE RECOMMENDATION ON COMPENSATION. THE EXECUTIVE COMMITTEE, LED BY THE BOARD PRESIDENT, CONDUCT THE EXECUTIVE DIRECTOR'S PERFORMANCE EVALUATION. THE EXECUTIVE COMMITTEE USES PERFORMANCE EVALUATION INFORMATION AND COMPARABLE COMPENSATION DATA PROVIDED BY UNITED WAY WORLDWIDE AND UNITED WAYS OF MN STATE ASSOCIATION TO FORM THE RECOMMENDATION ON COMPENSATION. ALL COMPENSATION AND BENEFIT RECOMMENDATIONS ARE THEN FORWARDED TO THE FINANCE/AUDIT COMMITTEE FOR RECOMMENDATION TO THE UNITED WAY OF MOWER COUNTY BOARD OF DIRECTORS. THE SALARY OF THE EXECUTIVE DIRECTOR IS DECLARED AND NOTED IN THE BOARD MINUTES. UNITED WAY'S BOARD OF DIRECTORS VOTES TO APPROVE THE UPCOMING YEAR BUDGET INCLUDING STAFF SALARIES.

Name of the organization

UNITED WAY OF MOWER COUNTY INC.

Employer identification number

410831896

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEE'

THE EXECUTIVE DIRECTOR OF THE UNITED WAY DONATES THE COMPENSATION EARNED FOR SERVING
ON THE HORMEL FOUNDATION BOARD BACK TO THE UNITED WAY. THIS COMPENSATION DOES NOT
GO DIRECTLY TO THE EXECUTIVE DIRECTOR BUT IS DESIGNATED AS DIRECTOR'S FEES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

AVAILABLE UPON REQUEST.

2008

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

CLIENT 75595ORI

UNITED WAY OF MOWER COUNTY INC.

410831896

5/19/10

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PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2008	2007	2006	2005	2004
OTHER REVENUE	8,126.	8,245.	10,223.	6,402.	4,866.
TOTAL	<u>\$ 8,126.</u>	<u>\$ 8,245.</u>	<u>\$ 10,223.</u>	<u>\$ 6,402.</u>	<u>\$ 4,866.</u>

2008

FEDERAL WORKSHEETS

PAGE 1

CLIENT 75595ORI

UNITED WAY OF MOWER COUNTY INC.

410831896

5/19/10

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FORM 990, PART IX, LINE 24
OTHER EXPENSES

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT & GENERAL	FUNDRAISING
CAMPAIGN AND AWARDS	9,658.			9,658.
COAT DRIVE EXPENSES	2,005.	2,005.		
DUES AND SUBSCRIPTIONS	10,328.	4,132.	3,098.	3,098.
EQUIPMENT MAINTENANCE	3,884.	1,554.	1,165.	1,165.
FAX AND INTERNET	358.	142.	108.	108.
GET FIT PROGRAM EXPENSES	4,045.	4,045.		
MARKETING EXPENSE	8,296.	4,148.		4,148.
OTHER EXPENSES	2,583.	1,607.	488.	488.
POSTAGE AND SHIPPING	2,617.	1,482.	567.	568.
SUCCESS BY SIX PROGRAM EXPENSE	35,222.	35,222.		
SUPPLIES	1,740.	696.	522.	522.
TELEPHONE	1,116.	446.	335.	335.
TOTAL	\$ 81,852.	\$ 55,479.	\$ 6,283.	\$ 20,090.

EXCESS CONTRIBUTIONS
SCHEDULE A, PART II, LINE 5

NAME	2004	2005	2006	2007	2009	TOTAL	2% AMT	EXCESS
TOTAL	\$ 339056.	\$ 407511.	\$ 402549.	\$ 548260.	\$ 570348.	\$ 2267724.	\$ 112889.	\$ 2154835.

2008

FEDERAL EXEMPT ORGANIZATION TAX SUMMARY

PAGE 1

CLIENT 75595ORI

UNITED WAY OF MOWER COUNTY INC.

410831896

5/19/10

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	2008	2007	DIFF
REVENUE			
CONTRIBUTIONS AND GRANTS	1,210,238	926,032	284,206
INVESTMENT INCOME	12,391	22,810	-10,419
OTHER REVENUE	8,126	8,245	-119
TOTAL REVENUE	1,230,755	957,087	273,668
EXPENSES			
GRANTS AND SIMILAR AMOUNTS PAID.. . . .	967,981	0	967,981
SALARIES, OTHER COMPENSATION, EMPLOYEE B	98,821	86,745	12,076
OTHER EXPENSES	110,413	796,332	-685,919
TOTAL EXPENSES	1,177,215	883,077	294,138
NET ASSETS OR FUND BALANCES			
REVENUE LESS EXPENSES.	53,540	74,010	-20,470
TOTAL ASSETS AT END OF YEAR	1,255,047	1,199,065	55,982
TOTAL LIABILITIES AT END OF YEAR	508,757	506,315	2,442
NET ASSETS OR FUND BALANCES AT END OF YE	746,290	692,750	53,540

2008

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION **PAGE 6**

CLIENT 75595ORI

UNITED WAY OF MOWER COUNTY INC.

410831896

5/19/10

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SCHEDULE D, PART XII, LINE 4B

OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

CUSTODIAL ACCOUNT ALLOCATIONS

TOTAL \$ 285,348.
\$ 285,348.

SCHEDULE D, PART XIII, LINE 4C

OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

CUSTODIAL ACCOUNT ALLOCATIONS

TOTAL \$ 285,348.
\$ 285,348.

2008

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION

PAGE 3

CLIENT 75595ORI

UNITED WAY OF MOWER COUNTY INC.

410831896

5/10/10

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PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

GRANTS ARE INCLUDED IN SCHEDULE I AND FIGURED INTO OUR PUBLIC SUPPORT TEST.

**SCHEDULE I - GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS,
GOVERNMENTS, AND INDIVIDUALS IN THE UNITED STATES**

PART II

NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	EIN	IRC SECTION IF APPLICABLE	AMOUNT OF CASH GRANT	AMOUNT OF NON- CASH ASSISTANCE	METHOD OF VALUATION	DESCRIPTION OF NON CASH ASSISTANCE	PURPOSE OF GRANT OR ASSISTANCE
ADAMS AREA AMBULANCE ADAMS, MN 55909	41-1822847	501 C 3	\$ 4,000				EMT TRAINING AND RE- CERTIFICATION
AMERICAN RED CROSS AUSTIN, MN 55912	41-0731419	501 C 3	\$ 120,000				HEALTH & SAFETY EDUCATION, ARMED FORCES EMERGENCY COMMUNICATION, BLOOD AND DISASTER SERVICES
ARC MOWER COUNTY AUSTIN, MN 55912	41-0746994	501 C 3	\$ 58,300				ADVOCACY, RECREATION AND TRANSPORTATION FOR PEOPLE WITH DISABILITIES
CATHOLIC CHARITIES WINONA, MN 55987	41-0721636	501 C 3	\$ 7,500				INDIVIDUAL AND FAMILY COUNSELING
CEDAR BRANCH DAC ADAMS, MN 55909	41-1311051	501 C 3	\$ 20,808				SOCIAL SKILLS, THERAPY AND WORK PROGRAMS FOR PEOPLE WITH DISABILITIES
CEDAR VALLEY SERVICES AUSTIN, MN 55912							COMMUNITY BASED EMPLOYMENT AND TRANSPORTATION FOR PEOPLE WITH DISABILITIES
CENTRO CAMPEÑO WATONNA, MN 55060	41-0870082	501 C 3	\$ 21,930				HEALTH EDUCATION AND ADVOCACY SERVICES FOR IMMIGRANTS
CHILDREN'S DENTAL HEALTH SERVICES ROCHESTER, MN 55902	41-1945775	501 C 3	\$ 3,000				TEETH CLEANING FOR CHILDREN WITHOUT DENTAL INSURANCE
CRIME VICTIM'S RESOURCE CENTER AUSTIN, MN 55912	20-3677586	501 C 3	\$ 14,000				SEXUAL ASSAULT ADVOCACY, DOMESTIC VIOLENCE GENERAL CRIME SERVICES
GRAND MEADOW AREA AMBULANCE GRAND MEADOW, MN 55936	41-6005198	501 C 3	\$ 750				EMT TRAINING AND RE- CERTIFICATION
HABITAT FOR HUMANITY AUSTIN, MN 55912	41-1681709	501 C 3	\$ 2,000				HOME BUILDING
FORMER HISTORIC HOME AUSTIN, MN 55912	41-0705219	501 C 3	\$ 645				EDUCATIONAL PROGRAMS
MEDIATION CENTER OF SOUTHERN MINNESOTA AUSTIN, MN 55912	41-2034060	501 C 3	\$ 5,500				CIVIL AND FAMILY MEDIATION SERVICES

**SCHEDULE I - GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS,
GOVERNMENTS, AND INDIVIDUALS IN THE UNITED STATES**

PART II

1

NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	EIN	IRC SECTION IF APPLICABLE	AMOUNT OF CASH GRANT	AMOUNT OF NON- CASH ASSISTANCE	METHOD OF VALUATION	DESCRIPTION OF NON CASH ASSISTANCE	PURPOSE OF GRANT OR ASSISTANCE
MOWER COUNCIL FOR THE HANDICAPPED AUSTIN, MN 55912	41-1505345	501 C 3	\$ 46,000				ADVOCACY, PEER SUPPORT GROUPS AND EQUIPMENT LENDING FOR PEOPLE WITH MENTAL HEALTH AND PHYSICAL DISABILITIES
MOWER COUNTY MENTORING AUSTIN, MN 55912	41-6005848	501 C 3	\$ 10,000				MENTORING PROGRAM FOR CHILDREN
MOWER COUNTY SENIORS AUSTIN, MN 55912							
PARENTING RESOURCE CENTER AUSTIN, MN 55912	41-1267614	501 C 3	\$ 44,300				TRANSPORTATION TO MEDICAL APPOINTMENTS, EDUCATIONAL PROGRAMS, ADVOCACY AND CHORE SERVICES FOR SENIORS.
RIVER VALLEY GIRL SCOUTS ROCHESTER, MN 55902	41-1307920	501 C 3	\$ 35,000				EMERGENCY AND SICK CHILD CARE, SPECIALTY LIBRARY, PARENT MENTOR PROGRAM AND HOTLINE FOR PARENTS
SALVATION ARMY AUSTIN, MN 55912	41-0838819	501 C 3	\$ 19,000				LEADERSHIP AND EDUCATIONAL PROGRAMS FOR GIRLS.
SEMCAC-RSVP RUSHFOR, MN 55971	41-0698597	501 C 3	\$ 74,000				COMMUNITY MEALS, EMERGENCY LODGING AND RENT/UTILITY ASSISTANCE
SOUTHERN MINNESOTA REGIONAL LEGAL SERVICES ALBERT LEA, MN 56007	41-0907135	501 C 3	\$ 2,000				VOLUNTEER PROGRAM FOR SENIORS
TWIN VALLEY BOY SCOUTS WANKATO, MN 56001	41-1316151	501 C 3	\$ 10,000				LEGAL SERVICES FOR LOW- INCOME PEOPLE TRYING TO ATTAIN GOVERNMENT BENEFITS
WAPITI MEADOWS CTS AUSTIN, MN 55912	41-6079300	501 C 3	\$ 25,000				EDUCATIONAL AND LEADERSHIP PROGRAMS FOR BOYS
	20-0058923	501 C 3	\$ 28,500				BUDGET COUNSELING AND MENTAL HEALTH SERVICES FOR CHILDREN AND ADULTS

**SCHEDULE I - GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS,
GOVERNMENTS, AND INDIVIDUALS IN THE UNITED STATES**

PART II

NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	EIN	IRC SECTION IF APPLICABLE	AMOUNT OF CASH GRANT	AMOUNT OF NON- CASH ASSISTANCE	METHOD OF VALUATION	DESCRIPTION OF NON CASH ASSISTANCE	PURPOSE OF GRANT OR ASSISTANCE
WELCOME CENTER AUSTIN, MN 55912	41-1978031	501 C 3	\$ 28,500				ADVOCACY, EDUCATION AND EMPLOYMENT PROGRAMS FOR NEW IMMIGRANTS
YMCA AUSTIN, MN 55912	41-0718359	501 C 3	\$ 60,400				LOW-COST MEMBERSHIP FOR CHILDREN, FINANCIAL ASSISTANCE FOR FAMILIES AND AFTER-SCHOOL PROGRAMMING
CHILDREN'S DENTAL HEALTH SERVICES	20-3677586	501 C 3	\$ 6,000				COMMUNITY IMPACT GRANT
PARENTING RESOURCE CENTER	41-1307920	501 C 3	\$ 8,500				COMMUNITY IMPACT GRANT
ARC MOWER COUNTY	41-0746994	501 C 3	\$ 1,750				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
HABITAT FOR HUMANITY	41-1681709	501 C 3	\$ 10,000				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
HORMEL HISTORIC HOME	41-0705219	501 C 3	\$ 109,208				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
MEDIATION CENTER	41-2034060	501 C 3	\$ 2,248				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
MOWER COUNCIL FOR THE HANDICAPPED	41-1505345	501 C 3	\$ 3,000				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
MOWER COUNTY SENIORS	41-1267614	501 C 3	\$ 4,145				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
PARENTING RESOURCE CENTER	41-1307920	501 C 3	\$ 62,297				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
GIRL SCOUTS OF MN & WI RIVER VALLEYS	41-0838819	501 C 3	\$ 9,000				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
TWIN VALLEY BOY SCOUTS	41-6079300	501 C 3	\$ 8,000				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
WAPITI MEADOWS CTS	20-0058923	501 C 3	\$ 10,700				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
WELCOME CENTER	41-1978031	501 C 3	\$ 65,000				HORMEL FOUNDATION GRANT - UW PASSES THROUGH GRANT
TOTAL			\$ 967,981				

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2008Attachment
Sequence No. 67

Name(s) shown on return

UNITED WAY OF MOWER COUNTY INC.

Business or activity to which this form relates

FORM 990/990-PF

Identifying number

410831896**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions).	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12.	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election.	15	
16	Other depreciation (including ACRS).	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	3,913.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B — Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property.						
b 5-year property.						
c 7-year property.						
d 10-year property.						
e 15-year property						
f 20-year property						
g 25-year property.			25 yrs		S/L	
h Residential rental property.			27.5 yrs	MM	S/L	
i Nonresidential real property.			39 yrs	MM	S/L	
				MM	S/L	

Section C — Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year.			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	3,913.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

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Form 4562 (2008)