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Department of the Treasury

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)

OMB No. 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service June 30 20 09 For the 2008 calendar year, or tax year beginning July 1 2008, and ending D Employer identification number C Name of organization United Way of Central Massachusetts, Inc. B Check if applicable USA IRS Doing Business As 2104017 Address change label or F Telephone number print or Number and street (or P O. box if mail is not delivered to street address) type. 300 (508) 757-5631 484 Main Street Initial return Specific City or town, state or country, and ZIP + 4 ☐ Termination tions. Worcester, MA 01608 G Gross receipts \$ 10.003.104 Amended return F Name and address of principal officer Timothy J. Garvin H(a) Is this a group return for affiliates? Yes No Application pending same as C above H(b) Are all affiliates included? ☐Yes ☐ No Tax-exempt status. 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ www.unitedwaycm.org H(c) Group exemption number ▶ Type of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 1920 M State of legal domicile: MA Part I Summary Briefly describe the organization's mission or most significant activities: United Way of Central Massachusetts connects people and resources to improve the community. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. SCANNED WAR 1 1 23 Number of voting members of the governing body (Part VI, line 1a) 4 20 Number of independent voting members of the governing body (Part VI, line 1b) 5 28 5 Total number of employees (Part V, line 2a) 6 2235 Total number of volunteers (estimate if necessary) 0 7a 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). b Net unrelated business taxable income from Form 990-T, line 34. 0 **Current Year** 6,828,802 6,794,932 Contributions and grants (Part VIII, line 1h) . 0 0 Program service revenue (Part VIII, line 2g) . 120,610 125,198 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 351,024 (685,034)Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 7,271,154 6,264,378 4,272,594 4,226,112 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . 1,627,121 1,551,474 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 52,879 51.741 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 866,041 教技件 925,291 769,288 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 6,802,238 6,674,262 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 468,916 (409,884)Revenue less expenses. Subtract line 18 from line 12 **Beginning of Year End of Year** 10,225,582 8,207,104 Total assets (Part X, line 16) . . 20 4,810,704 4,483,427 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 5,414,878 3,723,677 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 prue, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here (Ca suce name and title Check if Date Preparer's identifying number selfemployed 🕨 🗌 2010 Perparers s name (or you USO Only if self-employed Phone no ▶ (May the MS discuss this return with the preparer shown above? (see instructions) Yes No Form 990 (2008) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y

Par	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: United Way of Central Massachusetts is working to advance the common good by focusing on education, income,
	and health. These are the building blocks for a good life-a quality education that leads to a stable job, enough income
	to support a family through retirement, and good health. Our goal is to create long-lasting changes that prevent
	problems from happening in the first place by inspiring our community to give, advocate, and volunteer.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	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?
	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 \$3,488,193 including grants of \$3,144,430) (Revenue \$0)
	Community Impact Program - The Community Impact Program plays a critical role in the local community by helping
	those in need. As community leaders, we convene local resources - donors, volunteers, partners and agencies to
	address the most critical needs in three focus areas: ensuring children's readiness for school, supporting positive
	youth development, and helping people most in need. United Way of Central Massachusetts staff and volunteers,
	through a competitive process, evaluate funding proposals, select the highest quality agency programs to fund, and
	monitor program results to ensure maximum community impact. During FY 2009, 61 funded programs provide
	services in the one or more of the three basic components for a good life: education, health, and income.
	(Code:) (Expenses \$ 293,332 including grants of \$ 188,556) (Revenue \$ 0)
4D	(Code:) (Expenses \$ 293,332 including grants of \$ 188,556) (Revenue \$ 0) Women's Initiative Community Impact Program - The Women's Initiative focuses on building, strengthening, and
	supporting the development of confident and safe adolescent girls, and has successfully brought about lasting
	change. Through educational events, grants for area programs, financial literacy education, and sponsorship
	of a comprehensive local needs assessment, the Women's Initiative of the United Way is a thriving vehicle of change
	for girls in central Massachusetts. The Women's Initiative is engaging local women in providing financial literacy
	education to adolescent girls. In 2008, Women's Initiative delivered four, full-day conferences for almost 400
	middle-school girls, utilizing the time and talent of more than 100 professional women.
4c	(Code:) (Expenses \$ 227,880 including grants of \$ 100,000) (Revenue \$ 0)
	Worcester Youth Capacity Project - The Worcester Youth Capacity Project is a collaborative effort to strengthen
	the organizational capacity and sustainability of five faith-based and community-based organizations that are
	actively engaged in ending youth violence in Worcester. The project engages a community network of youth
	service providers in collaborative capacity building; builds the skills and leadership of youth work professionals,
	volunteers, and boards of directors; and develops organizational capacity of the five organizations in the areas
	of planning, evaluation, volunteer programming, and fiscal and management structures. In addition, the project
	helps develop effective programs, with a focus on positive youth development, outcome measurement, and
	promising practices in addressing youth violence. The project also advances organizational knowledge related to
	fund development planning and fundraising strategies. The funding for this project is provided by a federal grant
	from the Department of Health and Human Services.
4d	Other program services. (Describe in Schedule O)
4-	(Expenses \$ 1,136,293 including grants of \$ 793,126) (Revenue \$) Total program service expenses > \$ 5.145,698 (Must equal Part IX Line 25 Column (B))

B-	Observited of Demoired Cabadulas			
Pai	t 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		√
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	5		
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	_6		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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	9	✓	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	✓	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	12	1	
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	13	•	1
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		\
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1		<u>`</u>
15	business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	14b		✓
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
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	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	V	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓
21	Did the organization report more than \$5,000 on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	✓.	- -
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	_22		✓
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
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 questions	04-	ı	/
	24b–24d and complete Schedule K. If "No," go to question 25	24a 24b		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240	_	
С	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		24d		
	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	25a		✓
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	25b		1
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	26		1
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	27		1

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Part IV	T'DOCKHET	of Required	Schodillee	ICONTINUIDAI
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	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	✓	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		✓
С	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	✓	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		✓_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		✓
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		✓
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		✓
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		1
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		√

Form **990** (2008)

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U.S. Information Returns. Enter -0- if not applicable be flet the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 be flet with number of John W-2G included in line 1a. Enter -0- if not applicable 1 be flet with number of employees reported in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, fled for the calendar year ending with or within the year covered by this return. See If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3b. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3c. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3c. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3c. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3c. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3c. Did the organization have for this year? If "No," provide an explanation in Schedule O. 3d. J. Time of the form seed the foreign country. 3d. J. Time of the form seed the foreign country (such as a bank account; securities account, or other financial accounts, and fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 3d. J. Time of the organization approach of the foreign about the security of the forms and fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 3d. J. Time of Financial Accounts. 4d. J. Time of Financial Accounts. 4d. J. Time of Financial Accounts. 5d. J. Time of Financial Accou		X		Yes	No
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Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamibing) winnings to prize winners? 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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 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 in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts account)? b If "Yes," enter the name of the foreign country; b 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? if "Yes," to question 5a or 5b, did the organization file Form 8885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 If "Yes," did the organization notify the donor of the value of		U.S. Information Returns. Enter -0- if not applicable			
agaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 28 3 Istalements, filed for the calendar year ending with or within the year covered by this return 2a 28 5 If at least one is reported on line 2a, old the organization file all required factoral 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? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b If Yes, has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 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)? 5b If "Yes," enter the name of the foreign country: b- 5ce 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? 5b If "Yes," to question 5a or 5b, did the organization file Form 8886.7. Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d the organization provide goods or services in exchange for any quid pro quic contribution of more than \$757. 9d the organization sell, exchange, or otherwise dispose of tangbile personal property for which it was required to file Form 8882? 1a / Y 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c If Yes, "did the organization, during the year, receive any funds, directly or indirectl	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	l		Ì
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. 2	С		-	_	
Statements, filed for the calendar year ending with or within the year covered by this return 2a 2r8			1C	<u> </u>	<u> </u>
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 5b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 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?) 5b If "Yes," enter the name of the foreign country: ► 5ce the instructions for exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts. 5ce the instructions for exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts. 5ce the instructions for exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts. 5ce the structure of the organization and Financial Accounts. 5d Was the organization a party to a prohibited tax shelter transaction? 6d If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6d Did the organization solicit any contributions that were not tax deductible? 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 6d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282? 6d If "Yes," indicate the number of Forms 8282 filed during the year 6d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282? 7d Jeric Province of the file forms 89	h	otationicitis, filed for the calendar year ending with or within the year covered by this return	2b	1	
an Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 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)? 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? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6a Did the organization solicit any contributions that were not tax deductible? 5c Ba ✓ 5d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b John the organization solicit any contributions under section 170(c). 7c Organizations that may receive deductible contributions under section 170(c). 7d Did the organization provide goods or services in exchange for any quid prior quio contribution of more than \$757. 7d If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9d If "Yes," indicate the number of Forms 8282 filed during the year 1d If Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Por all contributions of cars, boats, arplanes, and other vehicles, did the organization file a Form 1098-C as required? 8 Section 501(c)(3) and other sponsoring organizations maintaining					
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this return? bif "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 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?) bif "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? or if "Yes," to question 5a or 5b, did the organization filer form 8886-T, Disclosure by Tax-Exempt Entity Reparding Prohibited Tax Shelter Transaction? 6a Did the organization solicit any contributions that were not tax deductible? 7b of "Yes," did the organization include with every solicitation an express statement that such contributions or girts were not tax deductible? 7c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? bif "Yes," did the organization notify the donor of the value of the goods or services provided? c) Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d) If "Yes," indicate the number of Forms 8282 filed during the year e) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g) For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 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 make any taxable distributions under section 4966? D) Did the organization make any taxable distributions under section 4966? D) Did the organization make any taxable distributions under	За	,			
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h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	f		7f		1
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9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			8		1
a Did the organization make any taxable distributions under section 4966?	9				
b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			9a		1
a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 10c 10a 10b 10b 11c 10c 10b 11c 10c 10c	b	•	9b		✓
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	10	140-1]		
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	_	Thindale is recorded and depicted contributions included on their vin, line 12.	ŀ		
a Gross income from members or shareholders		arous recorpts, moraded on room coo, rare vin, line 12, for public doe of clab facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a	D	- 144L1			
		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

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

Sec	tion A. Governing Body and Management			
			Yes	No
	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.			
1a				
b	Enter the number of voting members that are independent			
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		✓
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		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		1
7a				
	of the governing body?	7a		✓
b		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following			
а	The governing body?	8a	√	
b	Each committee with authority to act on behalf of the governing body?	8b	√	
9a	Does the organization have local chapters, branches, or affiliates?	9a		1
b				
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
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	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	۱.,	,	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		
Sec	tion B. Policies			T
		40	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	-	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		١,	
	rise to conflicts?	12b	✓	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	1	
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14	√	
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:			L
а	The organization's CEO, Executive Director, or top management official?	15a	1	
b	Other officers or key employees of the organization?	15b		✓
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	-		
	with a taxable entity during the year?	16a		1
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?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶Massachusetts			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)	c)(3)s	onlv)	
	available for public inspection. Indicate how you make these available. Check all that apply.	-,,5,5	2,)	
	✓ 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 int	erest	
. •	policy, and financial statements available to the public.	J. 1111	J, JJC	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde o	f the	
	organization: ► James Hayes, 484 Main Street, Suite 300 Worcester, MA 01608 508.757.5631			

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

- 1a 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) 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 the organization did not co	mpensate	any o	offic	er, e	dıre	ctor,	trus	tee, or key em	ployee.	
(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per week	Positi or dire		Officer		that ap Highes	Former	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Mark P. Bilotta Chair of the Board of Directors	1	1		1				0	0	0
Brian M. Chandley Clerk of the Board of Directors	1	1		1				0	0	0
Michael J. Mulrain Treasurer of the Board of Directors	1	1		1				0	0	0
Maria Addison	1			<u>v</u>				0	0	0
At-large Board Member Todd Bailey	1	√	-					0	0	0
At-large Board Member Maurice Boisvert	1	✓_						0	0	
At-large Board Member Michael F. Buckley	,	✓			-			_		
At-large Board Member	•	✓					_	0	0	0
At-large Board Member	1	✓						0	0	0
Jack Calareso, Ph.D. At-large Board Member	1	1						0	0	0
Joseph P. Carlson At-large Board Member	1	1						0	0	0
Linda A. Cavaioli At-large Board Member	1	/						o	.0	0
Mark Crandall At-large Board Member	1	1						0	0	0
Sandra Ellis	1	/						0	0	0
At-large Board Member Joseph Freitas	1						-	0	0	0
At-large Board Member Bruce Gaultney	1	√					\vdash	0	0	0
At-large Board Member Dennis L. Irish		✓				-		0	0	0
At-large Board Member Nancy Kidd Brown	Ļ <u>.</u>	✓	-	_		<u> </u>	 _			<u> </u>
At-large Board Member	1	✓						0	0	0

Part VII Section A. Officers, Directors, Tr	ustees, Key	<u>/ Emp</u>	oloye	ees,	an	d Hig	hest	· · · · · · · · · · · · · · · · · · ·	i Employees (co	ntinued)
(A)	(B)			•	C) 			(D)	(E)	(F)
Name and title	Average hours per week	ndividual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Glenn Knowlton At-large Board Member	- 1	/						0	0	0
Susan M. Mailman At-large Board Member	- 1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					-	0	0	0
Wendy O'Leary	- 1	 	\vdash					0	0	0
At-large Board Member Marcy Reed	'	✓	\vdash	-			-	U		
At-large Board Member	- 1	/						0	0	0
Laurie B. Ross, Ph.D. At-large Board Member	1	1						0	0	0
Elizabeth V. Young	1	 	\vdash				-	0	0	0
At-large Board Member	'	<u> </u>	╀	ļ	_	-	-	U	0	-
	-		L				<u> </u>			
		\vdash	+							
		\vdash	\vdash	-			-			
Timothy J. Garvin President and CEO	35			/				116,903	0	0
James L. Hayes	35	 		Ť				78,328	0	0
Vice President, Finance and Operations	100	<u> </u>	<u></u>	√	<u> </u>	İ	Ļ			
1b Total	<u> </u>	<u> </u>	<u>-</u>				<u>▶</u>	195,231	0	0
Total number of individuals (including the organization ► 1	se in raj wi	ютес	Jeive	eu i	HOF	e mai	пфі	oo,ooo in repo	mable compens	ation from the
3 Did the organization list any former office employee on line 1a? If "Yes," complete							loye	e, or highest o	compensated	Yes No
4 For any individual listed on line 1a, is the the organization and related organizations individual.	s greater tha	an \$1	50,0	000?	? If '	"Yes,'	" coi			4
5 Did any person listed on line 1a receive services rendered to the organization? If	or accrue	com plete	pen Sch	satı nedu	on ile J	from I for s	any such	unrelated org	anization for	5 ✓
Section B. Independent Contractors										
1 Complete this table for your five highest compensation from the organization.	compensate	ed ind	lepe	ende	ent (contra	acto	rs that receive	d more than \$10	00,000 of
(A) Name and business ad	ddress							(B) Description of s	services	(C) Compensation
							-			
							\perp			
2 Total number of independent contractors compensation from the organization ▶		those) in	1) v	vho	recei	ıved	more than \$1	00,000 ın	

Part	VII	Statement of Re	venue					<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a	72,358				
grai		Membership dues						
ts, am			1c	33,500				
gif ilar	d	Related organizations	<u>1d</u>					
ons, sim	е	Government grants (contri	butions). 1e	250,686			•	,
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, g		6 470 050				
itrib I otl	_	and similar amounts not include		6,472,258 23,170			× •* •	
Con	_	Noncash contributions include Total. Add lines 1a–1f	d in lines 1a-1f: \$	25,170	6,828,802	-	,	,,
		Total: Add inics to 11		Business Code	0,020,002			
enri	2a					······································		
Rev	b							
ice	C							
Program Service Revenue	d							
E a	е							
ogr.		All other program service						
<u> </u>	g	Total. Add lines 2a-2f		<u> ▶</u>	0			
	3	Investment income (inc			400.040			400.040
		other similar amounts)			120,610			120,610
	4 5	Income from investment o	f tax-exempt bor	nd proceeds				
	"	Royalties	(i) Real	(ii) Personal	-	•	<u> </u>	
	6-		53,487					
		Gross Hents Less. rental expenses	56,862	· · · · · · · · · · · · · · · · · · ·				
		Rental income or (loss)	(3,375)					
		Net rental income or (ic	oss)		(3,375)			(3,375)
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	3,685,239					
	ь	Less: cost or other basis			,			
		and sales expenses .	4,440,756					
		Gain or (loss)	(755,517)		(755,517)			(755,517)
venue	8a	Gross income from events (not including \$	fundraising					
eve		of contributions reported						
r Re		See Part IV, line 18	´ a	0		,		1
Other		Less direct expenses						<u> </u>
0	C	Net income or (loss) fro	om fundraising	events ▶	0			
	9a	Gross income from gam	ing activities.	0	- :			
	۱ .	See Part IV, line 19 Less: direct expenses.		·				
		Net income or (loss) from		·	0			
	10a	Gross sales of inve						
	١.	returns and allowances		1 -				
		Less: cost of goods so Net income or (loss) from		' L	0			ļJ
	ا د	Miscellaneous Reve		Business Code	 			
	112	Cost Recovery fees		900099	73,858	73,858		<u> </u>
	b				,,,,,,			
	, č							
	ď	All other revenue						
	i .	Total. Add lines 11a-1		•	73,858			
	12	Total Revenue. Add lir	nes 1h, 2g, 3, 4	, 5, 6d, 7d, 8c,				
	<u></u>	9c, 10c, and 11e		▶	6,264,378	73,858		(638,282)

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).

	All other organizations must complete col	umn (A) but are no	t required to comp	piete columns (B), (C	ε), and (D).
	not include amounts reported on lines 6b, , 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	4,226,112	4,226,112		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0	,	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0	;	-
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	245,996	25,172	200,623	20,201
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	1,032,142	390,332	199,804	442,006
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	35,049	13,474	6,035	15,540
9	Other employee benefits	225,565	92,510	48,240	84,815
10	Payroll taxes	88,369	29,614	25,923	32,832
11	Fees for services (non-employees):	0	0	0	
	Management	3,575	0	3,575	0
	Legal	18,450	0	18,450	0
_	Accounting	10,430	0	18,430	
d	Lobbying	51,741	U	0	<u>0</u> 51,741
	Professional fundraising services. See Part IV, line 17	22,352	0	22,352	31,741
	Investment management fees	217,257	175,251	28,758	13,348
	Other	56,678	4,575	1,344	50,759
12 13	Advertising and promotion	99,590	40,809	34,809	23,972
14	Office expenses	17,363	14,543	1,032	1,788
15		0	0	0	0
16	Royalties	109,367	38,464	31,330	39,573
17	Travel	18,431	11,474	3,064	3,893
18	Payments of travel or entertainment expenses			-,	
10	for any federal, state, or local public officials	0	o	0	0
19	Conferences, conventions, and meetings .	99,649	48,202	2,809	48,638
20	Interest	0	0	0	0
21	Payments to affiliates	62,921	22,274	17,725	22,922
22	Depreciation, depletion, and amortization.	35,658	12,623	10,045	12,990
23	Insurance	3,103	0	3,103	0
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.)				
а	Organization dues	2,918	269	1,776	873
b	Miscellaneous	1,976	0	1,726	250
d d					
e					
f 25	All other expenses	6,674,262	5,145,698	662,523	866,041
26	Joint Costs. Check here ▶ ☐ 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	0	0	0	0

Pa	rt X	Balance Sheet					
			(A) Beginning of year		(E End o	J) f year	
_	1	Cash—non-interest-bearing	946,157	1			6,921
	2	Savings and temporary cash investments		2			2,678
	3	Pledges and grants receivable, net		3		2,136	
	4	Accounts receivable, net	50,888	4		123	3,861
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0	5			0
	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	0	6	<u> </u>		0
ţ	7	Notes and loans receivable, net	0	7			0
Assets	8	Inventories for sale or use	0	8	•		0
As	9	Prepaid expenses and deferred charges	0	9			0
	10a	Land, buildings, and equipment: cost basis 10a 1,767,641					
	Ь	Less: accumulated depreciation. Complete			·		
		Part VI of Schedule D	152,587	10c		129	9,192
	11	Investments—publicly traded securities		11		4,838	8,170
	12	Investments—other securities. See Part IV, line 11	0				0
	13	Investments—program-related. See Part IV, line 11		13			0
	14	Intangible assets		14			0
	15	Other assets. See Part IV, line 11	601,152			_	9,856
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,225,582				7,104
	17	Accounts payable and accrued expenses	147,080				<u>7,545</u> 8,374
es	18	Grants payable	4,663,624			4,200	<u>0,314</u> 0
	19	Deferred revenue	0				0
	20 21	Tax-exempt bond liabilities	0		***	-	7,508
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
_		persons. Complete Part II of Schedule L	0				0
	23	Secured mortgages and notes payable to unrelated third parties	0				0
	24	Unsecured notes and loans payable	0				0
	25 26	Other liabilities. Complete Part X of Schedule D				4 49	0 3,427
es —	20	Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	4,010,704	20		4,40	<u> </u>
alances	07		5,220,646	27		3 463	2,357
3al	27 28	Unrestricted net assets	134,232				1,320
Ð	29	Permanently restricted net assets	60,000	1 1			0,000
or Fund B		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32			
Š	33	Total net assets or fund balances	5,414,878	33		3,72	3,677
	34	Total liabilities and net assets/fund balances	10,225,582	34		8,20	7,104
Pa	art XI	Financial Statements and Reporting					
1	Acc	ounting method used to prepare the Form 990. Cash Accrua	J 🔲 Other			Yes	No
28		e the organization's financial statements compiled or reviewed by an inc		t?	2a	1	
		e the organization's financial statements audited by an independent acc			2b	1	
c		es" to lines 2a or 2b, does the organization have a committee that assumes				1	
	the a	audit, review, or compilation of its financial statements and selection of an ir	ndependent accountan	t?	2c	✓	ــــــ
3a		a result of a federal award, was the organization required to undergo an		t forth i		1	
		Single Audit Act and OMB Circular A-133?			3a		✓
	If "Yes," did the organization undergo the required audit or audits?			3b	i	1	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization United Way of Central Massachusetts, Inc. 2104017 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) An organization that normally receives: (1) more than 33\% % 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 33/3 % 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 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 that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I c Type III-Functionally integrated **b** Type II **d** Type III-Other e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box . Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? |11g(III) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in organization (described on lines 1-9 in col. (i) listed in your organization in col support above or IRC section governing document? col (i) of your (i) organized in the US? (see instructions)) support? Yes No Yes No Yes Nο

Total

Schedule A (Form 990 or 990-EZ) 2008 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 Gifts, grants, contributions, and membership fees received. (Do not 6,672,750 6,784,490 6,828,802 6,522,822 6,549,218 33,358,082 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the 0 0 n organization without charge 6,522,822 6,549,218 6.672.750 6.784.490 6.828.802 33,358,082 Total. Add lines 1-3 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 3,795,961 shown on line 11, column (f) Public support. Subtract line 5 from line 4. 29.562,121 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 6,522,822 6,549,218 6,672,750 6,784,490 6,828,802 33,358,082 Amounts from line 4 . . . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 80.457 110,578 124.056 125,198 120,610 565,487 sources Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets 47,124 47,718 28,220 51,103 53.487 227.652 (Explain in Part IV.) 34.151.221 11 Total support. Add lines 7 through 10 . 0 12 Gross receipts from related activities, etc. (see instructions) 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 86.56 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . 14 92.41 15 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 33\% % support test - 2008. If the organization did not check the box on line 13, and line 14 is 33\% % or more, check this box b 331/4 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/4 % 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 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 checke	ed the box o	n line 9 of Pa	rt I.)			
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006_	(d) 2007	(e) 200	8 (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 1-5					<u> </u>	- -
	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	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						
_	Add lines 7a and 7b		 		<u> </u>	<u> </u>	
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support		1 4 4 5 5 5 5	1 , , , , , , ,	(1) 2222	1	n 10 = · ·
Ca	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8 (f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b						
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.)					<u> </u>	
14	First five years. If the Form 990 is for organization, check this box and stop	here	· · · · · · · · ·		h, or fifth tax	year as a s	ection 501(c)(3)
Sec	tion C. Computation of Public Su						· · · · · · · · · · · · · · · · · · ·
15 16	Public support percentage for 2008 (lir Public support percentage from 2007)					15 16	% _%
Sec	tion D. Computation of Investme	nt Income P	ercentage				
17 18	Investment income percentage for 200 Investment income percentage from 20			-	column (f)) .	17 18	% %
	33% % support tests – 2008. If the org	anızatıon did r	not check the b	oox on line 14,			
b	33% % support tests—2007. If the organ line 18 is not more than 33% %, check this	nization did not	check a box o	n line 14 or line	19a, and line	16 is more t	than 331/3 %, and
20		-	-	•			-

Part IV	Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
Part II - Se	ection B - Line 11 - United Way of Central Massachusetts, Inc. leases an office condominium it owns outright to
other loca	l non-profit agencies.
·	······································
	·
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-	
	······································
· • • • • • • • • • • • • • • • • • • •	

Supplemental Financial Statements

OMB No 1545-0047
2008
Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Unit	ed Way of Central Massachusetts, Inc.		04	-	2104017
Pai		or Advised Funds or Other Similar	Funds o	r Acc	counts. 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 L				
5	Did the organization inform all donors and funds are the organization's property, subjections				
6	Did the organization inform all grantees, do used only for charitable purposes and not impermissible private benefit?	nors, and donor advisors in writing that go the benefit of the donor or donor advi	isor or oth	er	
Pai	t II Conservation Easements. Comp	lete 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).		
	Preservation of land for public use (e.g.		-	stonc	ally important land area
	☐ Protection of natural habitat	☐ Preservati	on of cert	ified h	nistoric structure
	☐ Preservation of open space				
2	Complete lines 2a-2d if the organization held	l a qualified conservation contribution in th	e form of a	cons	ervation easement
	on the last day of the tax year.		ı		
					Held at the End of the Year
а	Total number of conservation easements .			2a	
b	Total acreage restricted by conservation ea			2b	
С	Number of conservation easements on a co			2c	
d	Number of conservation easements include	• • •			
3	Number of conservation easements modified the taxable year ▶	ed, transferred, released, extinguished, or	r terminate	d by	the organization during
4	Number of states where property subject to				
5	Does the organization have a written policy enforcement of the conservation easement				
6	Staff or volunteer hours devoted to monitor	ring, inspecting, and enforcing easements	s during th	e yea	ır ▶
7	Amount of expenses incurred in monitoring	, inspecting, and enforcing easements di	uring the y	ear ►	\$
8	Does each conservation easement reported $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$?.				Yes No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conservations.	ne text of the footnote to the organization			
Pai		ctions of Art, Historical Treasures, overed "Yes" to Form 990, Part IV, line 8		Simila	ır Assets.
1a	If the organization elected, as permitted un art, historical treasures, or other similar asseprovide, in Part XIV, the text of the footnot	ts held for public exhibition, education, or	research i	n furti	
b	If the organization elected, as permitted un historical treasures, or other similar assets provide the following amounts relating to the (i) Revenues included in Form 990, Part V	held for public exhibition, education, or r nese items:	esearch in	furth . ►	erance of public service,
	(ii) Assets included in Form 990, Part ${\sf X}$.			. ▶	\$
2	If the organization received or held works following amounts required to be reported	under SFAS 116 relating to these items:			
a b	Revenues included in Form 990, Part VIII, I Assets included in Form 990, Part X				\$ \$

Par	III Organizations Maintaini	ng Collections	of Art, Hist	orical Treasu	res, or C	Other Similar As	sets (continu	ued)
3	Using the organization's accession items (check all that apply):	and other records	s, check any	of the follow	ng that a	re a significant us	se of its colle	ction
а	Public exhibition		a L	Loan or ex				
b	Scholarly research		e L					
С	Preservation for future general	tions						
4	Provide a description of the organiz Part XIV.	ation's collections	and explai	n how they fur	ther the c	organization's exe	mpt purpose	in
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive do	onations of a ained as part	rt, historical tre of the organiza	asures, or ation's col	other similar lection?	☐ Yes ☐] No
Par	Trust, Escrow and Cust Part IV, line 9, or reported					wered "Yes" to I	Form 990,	
1a	Is the organization an agent, truster included on Form 990, Part X? .	e, custodian or ot	her intermed	diary for contri	butions o	r other assets not	☐ Yes 🗸] No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the fo	ollowing table:	_			
					ļ	An	nount	
C	Beginning balance				10	<u>; </u>		
d	Additions during the year				<u>1c</u>	L		
е	Distributions during the year				19			
f	Ending balance				<u>l 1</u> f			
2a b	Did the organization include an am If "Yes," explain the arrangement in	ount on Form 990					✓ Yes	No
	t V Endowment Funds. Co		zation ansv	wered "Yes"	to Form	990, Part IV, line	e 10.	
	•	(a) Current year	(b) Prior ye		ears back	(d) Three years back	(e) Four years	back
1a	Beginning of year balance	60,000						
b	Contributions	0						
_	Investment earnings or losses .	1,217						
_		0						
d	Grants or scholarships				•			
е	Other expenditures for facilities and programs	4.047	_		- ,			
	Administrative expenses	1,217					-	
g	End of year balance	60,000		1			1	
2	Provide the estimated percentage of			as:				
a	Board designated or quasi-endown		%					
b	Permanent endowment ► 100	%						
C	Term endowment ▶9	6						
3a	Are there endowment funds not in the organization by:	ne possession of the	ne organizati	on that are hel	d and adr	ninistered for the	Yes	No
	(i) unrelated organizations						3a(i) ✓	<u> </u>
	(ii) related organizations						3a(ii)	<u> </u>
b	If "Yes" to 3a(II), are the related org						3b	<u> </u>
4	Describe in Part XIV the intended u							
Par	t VI Investments—Land, Bu	uildings, and Eq	uipment. S	See Form 990), Part X,	line 10.		
	Description of investment	(a) Cost or of (investment)		(b) Cost or other basis (other)	(c)	Depreciation	(d) Book value	Ð
1a	Land	0		0			0	
b	Buildings			367,137		350,637	16,500	
~	Leasehold improvements			774,289		686,444	87,845	
d	Equipment			421,300		404,636	16,664	
-	Other	0		204,915		196,732	8,183	
	I. Add lines 1a-1e (Column (d) should	equal Form 990, Pa	art X, column				129	,192

Part VII	Investments-Other Securities	. See Form 990, Part X	, line 12.	
(a) [Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial deri	ivatives and other financial products			
	d equity interests			
•	· · · · · · · · · · · · · · · · · · ·			
	·			
	·			,
	·			····
	b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Relate	d. See Form 990, Part X	, line 13.	
(a	Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year m	
_				
		<u> </u>		
-				
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		
		(a) Description		(b) Book value
	in trust - United Way of Central Mas	sachusetts Fund held at	the Greater Worcester	449,856
Communi	ty Foundation.			
	· · · · · · · · · · · · · · · · · · ·			
Total. (Colu	mn (b) should equal Form 990, Part X, co		<u></u>	449,856
Part X	Other Liabilities. See Form 990,	Part X, line 25.		
	(a) Description of liability	(b) Amount		
Federal inc	ome taxes		_	
			_	
			—	
			- 	
			 	
			\dashv	
			_	
Total. (Column	(b) should equal Form 990, Part X, col (B) line 25) ▶			

In Part XIV, 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.

Page	

Pa	Reconciliation of Change in Net Assets from Form 990 to Financial Statement	S_		
· 1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,264,37	′8
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		<u>32</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		4)
4	Net unrealized gains (losses) on investments	4		9)
5	Donated services and use of facilities	5		0)
6	Investment expenses	6		0
7	Prior period adjustments	7		0
8	Other (Describe in Part XIV)	8	00	
9	Total adjustments (net). Add lines 4–8	9		_
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		9)
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue	$\overline{}$		20
1	Total revenue, gains, and other support per audited financial statements		1 4,124,72	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,	`	
a	<u> </u>	4		
þ	Donated services and use of facilities	<u> </u>		
C	recoveres of prior year grants	-1		
d	Cutor (Bescribe in Fact XIV)	_	2e (2,078,01)	21
e	Add lines 2a through 2d	-	3 6,202,74	
3	Subtract line 2e from line 1	F	0,202,73	+0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 38,46			
a	investment expenses not included on Form 550, Fait Vin, into 75	⊣ 1		
D D	Other (Describe in Part XIV)	\neg	4c 61,63	ን ጸ
5	Total revenue. Add lines 3 and 4c . (This should equal Form 990, Part I, line 12.)		5 6,264,3	
_	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses			10
		Ť	1 5,815,92	29
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	o		
a	Donated Services and use of facilities	<u>ל</u>		
	Filor year adjustments	5		
_	Eddades reported on Tourist 17, mile 20			
d	Other (Describe in Fact XIV)	2	2e	0
3	Add lines 2a through 2d		3 5,815,9	29
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	38.46	в		
a h	Other (Describe in Part XIV)	7		
c	Add lines 4a and 4b	4	4c 858,3	35
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5 6,674,2	64
Pa	rt XIV Supplemental Information			
and	Part V - Endowment Funds - Line 4: Earnings from endowments are used by the organization to subsidize its administrative expenses.			
2.	Part XII line 2d Other - Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	Designated donations - (\$768,126)			
	Professional fundraising fees charged by other organizations - (\$51,741)			
	Change in value of a beneficial interest in trust - (\$127,866)			

Part XIV Supplemental Information (continued)
Total = (\$947,733)
Part XII line 4d Other - Amounts included on Form 990, Part VIII, line 12, but not on line 1:
Donated newspaper advertising - \$21,528
Donated web site hosting services - \$1,642
Total = \$23,170
3. Part XIII - line 4b Other - Amounts included on Form 990, Part IX, line 25, but not on line 1:
Designated donations - \$768,126
Professional fundraising fees charged by other organizations - \$51,741
Total = \$819,867
,
4. United Way of Central Massachusetts served as a fiscal agent for the Diabetes Coalition of Massachusetts. The
total liability as of June 30, 2009 was \$7,508.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number 04 2104017

Part I Fundraising Activitie	es. Complete if	the orga	inization a	answered "Yes"	to Form 990, Part	IV, line 17.
1 Indicate whether the organization a ✓ Mail solicitations b ✓ Email solicitations c ✓ Phone solicitations d ✓ In-person solicitations	on raised funds t	hrough ar e	Solicitation Solicitation	ollowing activities. on of non-government on of government fundraising events	nent grants	
Did the organization have a writ or key employees listed in Form If "Yes," list the ten highest part	n 990, Part VII) or ud individuals or	entity in entities (f	connection undraisers	with professional pursuant to agre	fundraising services ements under which	s? ✓ Yes ☐ No h the fundraiser is
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fun custody d	draiser have or control of outlons?	(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
	1	Yes	No		301 (1)	
United Ways of New England	Wrkplc Cmpns	1		409,907	30,743	379,164
ABCD, Inc.	COMECC adm	1		136,154	11,614	124,540
Total			>	546.061	42,357	503,704
List all states in which the organistration or licensing. Massachusetts					nas been notified it	
					-	
					•••••	
	·					

P E	rt II	more than \$15,000 on F					repo	orted	
			(a) Event #1 Solicitation (event type)	(b) Event #2 Solicitation (event type)	(c) Other Events (total number)	(d) Tot (Add col		nrough	
Revenue	1	Gross receipts	18,500	15,000			_	33,	,500
œ	2	Less: Charitable contributions	18,500	15,000				33,	,500_
		minus line 2)	0	0					0
	4	Cash prizes	. 0	0					0
sesuec	5	Non-cash prizes	0	0			_		0
Direct Expenses	6	Rent/facility costs	4,749	5,700 7,021					<u>,459</u> 505
Dị	7 8	Other direct expenses Direct expense summary. Ad	16,574 d lines 4 through 7 in co			(,595 054)
Da	9 rt II	Net income summary Comb	ine lines 3 and 8 in colu	mn (d)		or ropo	rtod	(34,	054)
		than \$15,000 on Form		vered res to roilli	990, Fait IV, IIIIe 19,	or repo	1100		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Tota col (a)			
Re	1	Gross revenue							
uses	2	Cash prizes							
Direct Expenses	3	Non-cash prizes							
Direc	4	Rent/facility costs							
	5	Other direct expenses .	☐ Yes %	☐ Yes %	□ Ves %	-			
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes%				
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summar	y. Combine lines 1 and	7 ın column (d)	<u> </u>	L			Γ
	E۰	tor the state(s) is which the s	rganization energies es	amina activitics:		Γ		Yes	No
9 a		ter the state(s) in which the o the organization licensed to c					9a		
b		'No," Explain:							
10~	10/	ere any of the organization's o	ramina licanosa royalia	d evenanded or termin	nated during the tay yes		10a		
		'Yes," Explain:	-	a, suspended or termin					
							44		-
11 12		es the organization operate g the organization a grantor, be			a partnership or other	• • -	11		
		med to administer charitable					12		<u> </u>

Sche	dule G (Form 990 or 990-EZ) 2008		Yes	age 3
13	Indicate the percentage of gaming activity operated in:	\Box	163	140
а	The organization's facility			
b	An outside facility			
14	Provide 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?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address:			
	Name ▶			
	Address ▶			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			

☐ Independent contractor

☐ Director/officer

17 Mandatory distributions:

☐ Employee

in the organization's own exempt activities during the tax year ▶ \$

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Enter the amount of distributions required under state law distributed to other exempt organizations or spent

17a

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

2008

OMB No. 1545-0047

Open to Public Inspection

2104017

Employer identification number 9 ► Attach to Form 990. United Way of Central Massachusetts. Inc.

✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance

% □

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Part II

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
Big Brothers Big Sisters Cntrl	04-2317926	501(c)(3)	99,857				Program Operating
Boys-& Girls-Club of Worcester,- Inc. 65 Tainter Street Worc MA	04-2105851	501(c)(3)	49,928				Program Operating
Boys.& Girls Club of Worcester,	04-2105851	501(c)(3)	84,878				Program Operating
Boys-& Girls-Club of Worcester,	04-2105851	501(c)(3)	29,957				Program Operating
-Boys-& Girls-Club of Worcester,	04-2105851	501(c)(3)	44,448				Program Operating
The Bridge of Central MA, Inc	04-2701581	501(c)(3)	44,936				Program Operating
.The CASA Project .100 Grove Street Worcester. MA 01605	04-2711865	501(c)(3)	59,914				Program Operating
Children's Friend, Inc. 21-Cedar.	04-2105856	501(c)(3)	29,957				Program Operating
-Children's Friend, Inc21-Cedar- Street Worcester MA 01609	04-2105856	501(c)(3)	24,964				Program Operating
Community Healthlink, Inc. 72	04-2626179	501(c)(3)	79,885				Program Operating
Dynamy, Inc. 27 Sever Street	04-2621500	501(c)(3)	34,949				Program Operating
Family Health Center of Worc	04-2485308	501(c)(3)	86,875				Program Operating
2 Enter total number of section 501(c)(3) and government organizations	501(c)(3) and gov	ernment organizat	ions snoi			· · ·	12

3 Enter total number of other organizations

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

Cat No 50055P

Schedule I (Form 990) 2008

Page 2

Schedule I (Form 990) 2008

the organization to qualify for funding. Organizational documents including program description, Board of Directors' roster, operating budget, financial review or 1. 344 agencies receiving directly paid donor designations totaling less than \$5,000. The combined total of these donor designations was \$236,366 for this fiscal year. 2. 149 agencies receiving 3rd party paid donor designations totaling less than \$5,000. The combined total of these donor designations was \$58,418 for this fiscal year. (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. 4. Grant Monitoring Policies: Grant awards are determined through an open and competitive process with two phases. The first phase determines the eligibility of audit, 501(c)(3) determination letter, and a non-discrimination policy are required. If accepted into Phase II, the applicant organization submits a detailed program application with specific outcome measurements to ensure the funded programs will achieve maximum community impact in the specified focus area. Programs 3. Donor Designation Policy: Organizations receiving donor designated contributions undergo a screening process prior to the distribution of funds. Screening receive funding through recommendations from volunteer committees with final approval by the full Board of Directors. The funded programs are monitored Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. includes verification of current status as an IRS Code Section 501(c)(3) nonprofit organization and verification of Patriot Act compliance. (e) Method of valuation (book, FMV, appraisal, other) throughout the program cycle through regular reporting on progress toward outcomes and United Way coordinated site visits. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance (continued on Schedule O.) Part IV Part III

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Open to Public Inspection

OMB No 1545-0047

Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating **Program Operating** Program Operating (h) Purpose of grant or assistance Employer identification number 15 2104017 (g) Description of non-cash assistance (Form 990), Part 04 (f) Method of valuation (book, FMV, appraisal, other) Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash assistance 55,919 73,154 24,964 44,939 9,985 24,964 006'69 74,893 49,928 73,894 14,979 33,951 30,482 31,638 29,957 Enter total number of Section 501(c)(3) and government organizations if applicable 501(c)(3) 23-7112665 04-2104239 04-2123666 04-2123666 22-2599363 04-3393955 04-2105885 04-2105885 23-7112665 23-7112665 23-7112665 04-2105873 04-2103767 04-2626179 04-2507815 (p) EIN Enter total number of other organizations United Way of Central Massachusetts. Inc. Family Services of Central MA. 3.1... Harvard Street Worcester, MA 01609 Girls Incorporated of Worcester, 125. Gurls Incorporated of Worcester, 125 Rambow.Child Development Genter. YMCA of Central Massachusetts..... Friendly House, Inc. . 36. Wall Street. Coalition 26 Queen Street Word, MA Oak Hill CDG 74-Providence Street. YMCA of Central Massachusetts.... Youth Opportunities Upheld, Inc. 81 Youth Opportunities Upheld, Inc. 81 Plantation Street Worcester, MA Youth Opportunities Upheld, Inc. 81 Youth Opportunities Upheld, Inc. 81 Plantation Street Worcester, MA Salem Square Worcester, MA 01608 (a) Name and address of organization or government MA, 120 Chandler Street Worc, MA Sautheast Asian Coalition of Cntrl. YWCA of Gentral Massachusetts.1 Providence Street Worcester, MA Providence Street Worcester, MA 10 Edward Street Worcester, MA Plantation Street Worcester, MA Plantation Street Worcester, MA 766 Main Street Worcester, MA 766 Main Street Worcester, MA UMass.Mem. Hithcare/HOPE Worcester, MA 01604 Worcester, MA 01604 Name of the organization Part I

Schedule I-1 (Form 990) 2008

Cat. No 51026W

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

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Internal nevenue Service							
Name of the organization						Employer iden	Employer identification number
United Way of Central Massachusetts. Inc.	setts. Inc.					- 40	2104017
Part 1 Continuation of Grants and Other Assistance t	ts and Other A	ssistance to Go	vernments and Or	o Governments and Organizations in the	U.S. (Schedule I (Form 990), Part II.	orm 990), Part II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
. Centro Las Americas 11. Sycamora Street Worcester, MA 01608	04-2714991	501(c)(3)	43,000				Program Operating
.Community. Healthlink, Inc. 72Jaques Avenue Worcester, MA	04-2626179	501(c)(3)	71,086				Program Operating
.Community. Healthlink, loc. 72	04-2626179	501(c)(3)	20,857				Program Operating
Elm Park Ctr. Early Childhood Edu 284 Highland Street Worcester, MA	04-2500932	501(c)(3)	18,200			_	Program Operating
Guld Of St. Agnes 133 Granite	04-2104267	501(c)(3)	15,400				Program Operating
Guild Of St. Agnes.133. Granite	04-2104267	501(c)(3)	22,000				Program Operating
.M.S.P.C.C335.Chaodler.Street Worcester, MA 01602	04-2103596	501(c)(3)	25,000				Program Operating
Rambow Child Development Center.	04-2507815	501(c)(3)	43,885				Program Operating
Webster Square Day Care Center	04-2449880	501(c)(3)	26,250			n, n	Program Operating
Worcester Comprehensive Child	04-2484586	501(c)(3)	24,750				Program Operating
YWCA of Central Massachusetts.1	04-2105873	501(c)(3)	22,500				Program Operating
YWCA of Gentral Massachusetts 1	04-2105873	501(c)(3)	22,500				Program Operating
American Red Cross. 2000 Century Drive Worcester, MA 01606	53-0196605	501(c)(3)	189,717				Program Operating
American Red Cross . 2000 Century Drive Worcester, MA 01606	53-0196605	501(c)(3)	45,171				Program Operating
Catholic Charities Worcester County.	04-2103979	501(c)(3)	64,142				Program Operating
 Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations 	501(c)(3) and gov ganizations	ernment organizat					15
For Privacy Act and Paperwork Reduction Act Notice. see the Instruct	ction Act Notice. se	e the Instructions for	ions for Form 990.	Cat	Cat No 51026W	Sch	Schedule I-1 (Form 990) 2008

Department of the Treasury

Continuation Sheet for Schedule I (Form 990)

20**08**

OMB No. 1545-0047

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Open to Public Inspection

Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating Program Operating (h) Purpose of grant or assistance Employer identification number 5 0 2104017 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule | (Form 990), Part II.) (g) Description of non-cash assistance 04 (f) Method of valuation (book, FMV, appraisal, other) (c) IRC Code section (d) Amount of cash grant split applicable assistance 20,779 99,736 22,585 20,959 74,711 14,906 62,421 3,343 113,830 43,364 52,127 49,688 63,239 36,588 76,791 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 04-2947495 04-3098024 04-2661664 04-2791448 04-2626179 04-2453851 04-3393955 04-2485308 04-2103767 04-2104350 04-2446242 04-2324773 04-2545221 04-2545221 04-2513817 (b) EIN United Way of Central Massachusetts. Inc. VNA Care. Network .. Inc. .120. Thomas Central MA. Housing Alliance, Inc.... Harvard Street Worcester, MA 01609 Jewish Famuy Service of Worcester. Inc. 646 Salisbury Street Worc., MA Berkley Street, Suite 500 Boston, MA Eamily Health Center of Worc. Inc. ... 26 Queen Street Worc., MA 01610 Legal Assistance Corporation of Cntrl MA 405 Main Street Worc , MA Inc. 411 Chandler St. Worcester, MA Inc. 411 Chandler St. Worcester, MA Great Brook. Valley. Health. Center.... Inc 19 Tacoma Street Worc., MA So. Middlesex.Opportunity.Council... 300 Howard St. Framingham, MA Community, Healthlink, Inc. 72..... MA, 120 Chandler Street Worc., MA (a) Name and address of organization or government Massachusetts. Vaterans, Inc. 69... Grove Street Worcester, MA 01605 Pernet Family Health Service, Inc. 237 Millbury Street Worcester, MA Southeast Asian Coalition of Cntri Elder Services of Worcester Area, Elder Services of Worcester Area, Famly Services of Central MA .31 The Community Builders, Inc. 95 Bellevue Street Worcester, MA Jaques Avenue Worcester, MA Street Worcester, MA 01608 Name of the organization Internal Revenue Service

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

Enter total number of other organizations

No 51026W Cat

Schedule I-1 (Form 990) 2008

Department of the Treasury Internal Revenue Service

Name of the organization

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047 2008 Open to Public Inspection

Employer identification number 2104017 04 United Way of Central Massachusetts. Inc.

۶.	setts, mc.				11 C (Cabadada 1	- +0 (000 cm²	7104017
(a) Name and address of organization (b) EIN (c) IRC Code s	(b) EIN	(c) IRC Code section	(c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, (g) Description of the control of	(e) Amount of non-cash	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
or government		if applicable		assistance	other)	non-cash assistance	or assistance
. Warcester Community. Action	04-2382160	501(c)(3)	49,688				Program Operating
YWCA of Gentral Massachusetts.1	04-2105873	501(c)(3)	40,909				Program Operating
YWCA of Central Massachusetts.1	04-2105873	501(c)(3)	36,137				Program Operating
YWCA of Gentral Massachusetts.1 Salem Square Worcester, MA 01608	04-2105873	501(c)(3)	75,764				Program Operating
Boys & Girls Club of Worcester, Inc 65 Tainter Street Worc., MA 01610	04-2105851	501(c)(3)	35,500				Program Operating
Clark University, 950 Main Street	04-2111203	501(c)(3)	15,000				Program Operating
WSC.End.: Latine Education Institute 486 Chandler St. Worc., MA	04-6002284	501(c)(3)	27,374				Program Operating
The Community Builders, lac. 95 Berkley Street, Suite 500 Boston, MA	04-2324773	501(c)(3)	13,000				Program Operating
Worcester Polytechnic Institute, 100. Institute Road Worcester, MA 01609	04-2121659	501(c)(3)	24,482				Program Operating
YWCA of Central Massachusetts.1 Salem Square Worcester, MA 01608	04-2105873	501(c)(3)	20,000				Program Operating
YWCA of Central Massachusetts.1	04-2105873	501(c)(3)	45,000				Program Operating
Children's Friend, Inc. 21 Cedar.	04-2105856	501(c)(3)	5,000				Minor Capital Grant
Worcester Community Action Council 484 Main Street, Worc., MA	04-2382160	501(c)(3)	5,000				Minor Capital Grant
Youth Opportunities Upheld, Inc81. Plantation Street Worcester, MA	23-7112665	501 (c)(3)	5,000				Minor Capital Grant
Worcester Comprehensiva Chuld	04-2484586	501(c)(3)	5,000				Minor Capital Grant
 Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations 	501(c)(3) and govidanizations	ernment organizat	suoi				15
For Privacy Act and Paperwork Reduction Act Notice, see the Instruct	ction Act Notice, se	e the Instructions	ions for Form 990.	Cat	Cat. No 51026W	Sci	Schedule I-1 (Form 990) 2008

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Open to Public

OMB No. 1545-0047

Inspection Employer identification number

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

General Operating (General Operating (Minor Capital Grant General Operating (General Operating (General Operating (Program Operating General Operating (Program Operating Program Operating Program Operating Program Operating Program Operating Capacity Building Capacity Building (h) Purpose of grant or assistance 5 2104017 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 9 (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (c) IRC Code section (d) Amount of cash grant if applicable 5,000 20,000 5.000 40,000 40,000 8,000 8,000 8,000 5,000 5,000 5,000 5,000 5,000 20,000 20,000 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3)501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 04-2507815 04-2791448 04-2382160 53-0196605 04-2123666 04-6002284 04-3071457 04-2791448 04-3071457 04-2382160 04-2121659 04-2105873 04-3452763 04-3245867 03-0385377 United Way of Central Massachusetts. Inc. WSC End - Latino Education Institute 486 Chandler St. Worc., MA Rambow Child Development Center. 10 Edward Street Worcester, MA Girls Incorporated of Worcester, 125. Central MA Housing Alliance, Inc. . . . Nativity.School of Worcester. 10..... Council 484 Main Street, Worc., MA Worcester Polytechnic Institute 100 American Red Cross. 2000 Century. Drive Worcester, MA 01606 Salem Square Worcester, MA 01608 Tenacity, Inc. 367 Western Ave, 2nd Floor Brighton, MA 02135 Institute Road Worcester, MA 01609 (a) Name and address of organization Central MA Housing Alliance, Inc... Worcester County Food Bank 474. Boston Turnpike Shrewsbury MA Worcester Youth Center, Inc., 27... Chandler St. Worcester, MA 01609 Worcester County Food Bank 474. Boston Turnpike Shrewsbury MA YWCA of Central Massachusetts.1 Providence Street Worcester, MA Worcester Community Action.... Bellevue Street Worcester, MA Bellevue Street Worcester, MA Irving St. Worcester, MA 01609 or government Name of the organization

Enter total number of other organizations

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

Cat. No 51026W

Schedule I-1 (Form 990) 2008

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Open to Public

OMB No 1545-0047

Inspection

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Program Operating Donor Desg.3rd Pty **Donor Designated Donor Designated Donor Designated** Capacity Building Capacity Building **Donor Designated Donor Designated Donor Designated** Capacity Building (h) Purpose of grant or assistance Employer identification number 1 2104017 Part Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II. (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (c) IRC Code section (d) Amount of cash grant if applicable 7,965 27,904 458 22,375 2,625 2,026 1,280 20,883 20,000 20,000 20,000 20,468 21.800 39.500 28,337 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3)501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3)04-3393955 04-3460213 05-0566468 04-2382233 04-2382233 53-0196605 53-0196605 04-2105851 04-2105851 04-2104363 04-2382160 04-2103979 04-2103979 04-2105867 04-2105867 (p) EIN Enter total number of other organizations United Way of Central Massachusetts, Inc. Catholic Chardies Worcester County. 10 Hammond Street Worcester, MA American Red Cross 2000 Century. Drive Worcester, MA 01606 Southeast Asian Coalition of Cntrl... United Way of Massachusetts Bay ... 51 Sleeper St. Boston, MA Catholic Charities Worcester County United Way of Massachusetts Bay... American Red Cross 2000 Century. Christ Apostolic Cburch.: Higher Ed. Resrce Ctr 1189 Main St. Worc. MA Boy.Scouts.: Mobegan Council.Inc.. 19 Harvard St. Worcester., MA Boys. & Girls. Club. of Worcester, Inc. 65 Tainter Street Worc., MA 01610 Worcester Boots Project .4 King St. Worcester Community Action...... .Boy.Scouts.: Mobegan.Council.Inc. 19 Harvard St. Worcester., MA Boys, & Girls, Club. of Worcester, Inc. Jewish Faderation of Cutrl MA 633... MA, 120 Chandler Street Worc., MA 10 Hammond Street Worcester, MA (a) Name and address of organization 65 Tainter Street Worc., MA 01610 Salisbury St. Worc. MA 01609 Drive Worcester, MA 01606 51 Sleeper St. Boston, MA or government Worcester, MA. 01610 Name of the organization

Schedule I-1 (Form 990) 2008

Cat. No 51026W

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

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection

OMB No 1545-0047

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty **Donor Designated Donor Designated** Donor Designated (h) Purpose of grant or assistance **Employer identification number** 5 2104017 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II. (g) Description of non-cash assistance 9 (f) Method of valuation (book, FMV, apprasal, other) (c) IRC Code section (d) Amount of cash grant applicable (d) Amount of assistance 15,204 12,695 663 15,304 1,430 20,977 52 104 13,277 7.880 5,057 11,449 19,771 577 18,311 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 04-2947495 04-2105885 04-2105885 04-2947495 04-2626179 05-0276059 04-2104239 04-2104239 23-7112665 23-7112665 04-2105873 04-2104231 04-2103940 05-0276059 04-2104231 (b) EIN United Way of Central Massachusetts. Inc. .United Way.of.Tri-County.46.Park.St. Framingham, MA 01702 Youth Opportunities Upheld, Inc. 81. Plantation Street Worcester, MA Yauth Opportunities Upheld, Inc. 81. United Way of Grtr Plymouth Cnty... 928 W. Chester St. Brockton, MA YMGA of Central Massacbusetts..... 766 Main Street Worcester, MA VNA Care Network. Inc. 120 Thomas Street Worcester, MA 01608 VNA Care Network Inc. 120 Thomas Street Worcester, MA 01608 .Community. Healthlink, log. 72..... Salem Square Worcester, MA 01608 United Way of Tri-County 46 Park St. United Way of RI 50 Valley St...... Friendly House, Inc. .36. Wall Street. .YMCA of Central Massachusetts.... 766 Main Street Worcester, MA Ligited Way of RU 50 Valley St...... Providence, RI 02909 Friendly House, Inc., 36 Wall Street. (a) Name and address of organization YWCA of Central Massachusetts.1 Plantation Street Worcester, MA Jaques Avenue Worcester, MA or government Framingham, MA 01702 Worcester, MA 01604 Worcester, MA 01604 Name of the organization

Schedule I-1 (Form 990) 2008

Cat. No. 51026W

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

Enter total number of other organizations

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

2008

OMB No. 1545-0047

Open to Public Inspection

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Employer identification number 04 2104017

4 United Way of Central Massachusetts. Inc. Name of the organization

Part Continuation of Grants and Other Assistance to Governments and Organizations in the	nts and Other A	ssistance to Go	vernments and Or	ganizations in the	U.S. (Schedule I (Form 990),	orm 990), Part II.)	# ** ** ** ** ** ** ** ** ** ** ** ** **
(a) Name and address of organization or government	(p) EIN	(c) IRC Code 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
Cbildren's Friend, Inc., 21 Gedar Street Worcester, MA 01609	04-2105856	501(c)(3)	9,500				Donor Designated
.Children's Frlend, Inc21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	1,456				Donor Desg.3rd Pty
.UW : North Central Mass, Inc. 285 John Fitch Hwy., Fitchburg, MA	04-2233021	501(c)(3)	9,562				Donor Designated
.UW - North Central Mass, Inc. 285	04-2233021	501(c)(3)	1,151				Donor Desg.3rd Pty
Big Brothers Rig Sisters Cutrl MA/Metro West Worcester, MA	04-2317926	501(c)(3)	10,067				Donor Designated
Big Brothers Big Sisters Cntd	04-2317926	501(c)(3)	631				Donor Desg.3rd Pty
.UW - Southbridge, Sturkridge, and Charlton 50 Elm St. Southbridge, MA	04-2308155	501(c)(3)	8,779				Donor Designated
UW - Soutbbridge Sturbtidge and Charlton 50 Elm St. Southbridge, MA	04-2308155	501(c)(3)	1,651				Donor Desg.3rd Pty
Nativity School of Worcester. 10	03-0385377	501(c)(3)	10,120				Donor Designated
Guild Of St. Agnes 133 GraniteStreet Worcester, MA 01604	04-2104267	501(c)(3)	8,765				Donor Designated
Guild Of St. Agnes.133. Granite Street Worcester, MA 01604	04-2104267	501(c)(3)	1,300				Donor Desg.3rd Pty
Bacraft School 110 Share Dr. Worcester, MA 01605	04-2103861	501(c)(3)	002'6				Donor Designated
Parnet Family Health Service, Inc 237 Millbury Street Worcester, MA	04-2453851	501(c)(3)	8,833				Donor Designated
Pernet Family Health Service, Inc. 237 Millbury Street Worcester, MA	04-2453851	501(c)(3)	386				Donor Desg.3rd Pty
Worcester Youth Center, Inc., 27 Chandler St. Worcester, MA 01609	04-3245867	501(c)(3)	9,216				Donor Designated
	1 501(c)(3) and gov	rernment organizat	suoi				15
3 Enter total number of other organizations	rganizations .						

Schedule I-1 (Form 990) 2008

Cat No 51026W

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

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Open to Public 2008

OMB No 1545-0047

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Inspection

Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg. 3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty **Donor Designated Donor Designated** Donor Designated (h) Purpose of grant or assistance Employer identification number 5 0 2104017 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 9 (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (c) IRC Code section (d) Amount of cash grant if applicable 8,725 7,075 420 8,840 5,494 2,043 1,039 130 6,614 7,020 503 6,602 6.500 6,277 6,461 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3)501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 04-2791448 04-2106689 04-2123666 04-2104350 04-2111203 04-2485308 04-3071457 04-3071457 04-2970467 04-2970467 04-2123666 04-2104350 04-3095047 04-2545221 04-2545221 (p) EIN United Way of Central Massachusetts. Inc. Jewish Family. Service of Morcester... Inc 646 Salisbury Street Worc., MA Girls Incorporated of Worcester, 125. Providence Street Worcester, MA Girls Incorporated of Worcester, 125. Jewish Family Service of Worcester, Inc. 646 Salisbury Street Worc., MA Clark University, 950 Main Street..... Elder Services of Worcester Area.... Inc. 411 Chandler St. Worcester, MA Elder Services of Worcester Area.... Inc. 411 Chandler St. Worcester, MA Mary. Queen.of the Rosary. Parish.60. Family Health Center of Wors Inc.... AIDS. Project Worcester 85 Green... St. Francis Episcopal Church 70.... Highland St. Holden, MA 01520 Central MA Housing Alliance, Inc. . . .AIDS.Project Worcester 85 Green... Street Worcester, MA 01604 (a) Name and address of organization Worcester.County. Food Bank 474. Worcester County Food Bank 474. Boston Turnpike Shrewsbury MA 26 Queen Street Worc, MA 01610 Providence Street Worcester, MA Boston Turnpike Shrewsbury MA Bellevue Street Worcester, MA Maple St. Spencer, MA 01562 Street Worcester, MA 01604 or government Worcester, MA 01610 Name of the organization

Schedule I-1 (Form 990) 2008

Cat No. 51026W

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

Enter total number of other organizations

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Open to Public 2008

OMB No. 1545-0047

Inspection

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Donor Desg.3rd Pty Program Operating **Donor Designated Donor Designated** (h) Purpose of grant or assistance Employer identification number 3 0 2104017 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 9 (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (c) IRC Code section (d) Amount of cash grant if applicable 5,640 650 2,849 2,400 4,390 5,000 5,000 5,000 39,500 942 5.400 780 4,627 Enter total number of Section 501(c)(3) and government organizations 501(c)(3) 04-2711865 04-2104354 04-2382160 04-2711865 22-2912515 04-2797686 04-2797686 04-2106689 05-0521735 04-2797686 04-2382160 04-2648411 04-2648411 (p) EIN Enter total number of other organizations United Way of Central Massachusetts. Inc. Abby Kelley Foster House, 52 High... St. Worcester, MA 01609 Junior Ashlevement of Certral MA... Bishop's Fund - Partnets in Charity -- 49 Elm Street, Worc. MA 01609 Worcester Community Action Council 484 Main Street, Worc., MA Junior Achievement of Central MA... Worcester Center for Performing..... Worcester Community Action Council 484 Main Street, Worc., MA The CASA Project .100 Grove Street Abby Kelley Foster House, 52 High. Jewish Big Bros. & Big Sis. of Gr..... Boston 333 Nahanton St Newton Ct, The CASA Project .100 Grove Street (a) Name and address of organization 484 Main St. Worcester, MA 01608 Junier Achievement of Central MA. 484 Main St. Worcester, MA 01608 Fallon Clinic Foundation, Inc. 109. Front Street FL 14 Worcester, MA 484 Main St. Worcester, MA 01608 or government St. Worcester, MA 01609 Worcester, MA 01605 Worcester, MA 01605 Name of the organization

Schedule I-1 (Form 990) 2008

Cat. No. 51026W

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

SCHEDULE J (Form 990)

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047
2008

2104017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

United Way of Central Massachusetts, Inc.

Employer identification number

Pai	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of 1 990, Part VII, Section A, line 1a. Complete Part III to provide any re	he following to or for a person listed in Form levant information regarding these items.		
	☐ First-class or charter travel ☐ Housin	g allowance or residence for personal use		
	☐ Travel for companions ☐ Payme	nts for business use of personal residence		
	☐ Tax indemnification and gross-up payments ☐ Health	or social club dues or initiation fees		
	☐ Discretionary spending account ☐ Persor	al services (e.g., maid, chauffeur, chef)		
b	If line 1a is checked, did the organization follow a written policy			╁
_	provision of all of the expenses described above? If "No," com	Diete rait iii to explain	-	
2	Did the organization require substantiation prior to reimbursing officers, directors, trustees, and the CEO/Executive Director, re		!	ļ ₁
3	Indicate which, if any, of the following the organization uses to organization's CEO/Executive Director. Check all that apply.	establish the compensation of the		
		employment contract		
	·	ensation survey or study		
		al by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Se			
а	Receive a severance payment or change of control payment?.			1
b		1 4		1
С		- I	<u> </u>	
	If "Yes" to any of lines 4a-c, list the persons and provide the a	opplicable amounts for each item in Part III.		
	Only 501(c)(3) and 501(c)(4) organizations must complete lin	es 5–8.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did	the organization pay or accrue any		
_	compensation contingent on the revenues of:	5		
a	The organization?	· · · · · · · · · · · · · · · · · · ·		1
D	If "Yes" to line 5a or 5b, describe in Part III.	· · · · · · · · · · · · · · · · · · ·		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did	the organization pay or accrue any		
٠	compensation contingent on the net earnings of:	and digamentality pay or address any		
а			а	✓
	Any related organization?	<u>6</u>	b	✓
	If "Yes" to line 6a or 6b, describe in Part III.			<u> </u>
7			_	,
	payments not described in lines 5 and 6? If "Yes," describe in	· · · · · · · · · · · · · · · · · · ·	<u> </u>	1
8	Were any amounts reported in Form 990, Part VII, paid or accr			
	subject to the initial contract exception described in Regs. sec	ion 53.4958-4(a)(3)? If "Yes," describe	,	

Page 2

Schedule J (Form 990) 2008

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Part II

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-2		and/or 1099-MISC compensation			Total of a later	
(A) Name	•	(i) Base compensation		(iii) Other reportable compensation	compensation	benefits	(a)-(i)(a)	reported in prior Form 990-EZ
Timothy J. Garvin	€ €	116,903	0	0	0	20,901	137,804	145,261
James L. Hayes	E 5	78,328	0	0	0	17,689	96,017	99,282
	€ €							
	(ii)							
	(ii)							
	€ 🗒							
	© ©		,					
	(ii)							
	(ii)							
	(1)							
	(1)							
	88							
	(E)							
	88							
	(ii)							
	(ii)							
							Sche	Schedule J (Form 990) 2008

Schedule J (Form 990) 2008 Page 3
ا م ق
The Executive Committee acts as a Compensation Committee recommending any changes to the President/CEO salary. Any recommendations are subject to full
Board of Directors approval.
Schedule J (Form 990) 2008

SCHEDULE L (Form 990 or 990-EZ)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Employer identification number

United Way of Central Massachusetts,	Inc.					0	4		2104	017	
Part I Excess Benefit Transaction To be completed by organization								m 990-	-EZ, Part	V, line	40b.
4 (2) Name of the called				4						(c) C	orrected?
1 (a) Name of disqualified person				transaction				Yes	No		
			-		-						ļ
				 		<u> </u>					-
										+	
		-					·				-
											1
2 Enter the amount of tax imposed or under section 49583 Enter the amount of tax, if any, on I											-
Part II Loans to and/or From Inter To be completed by organization			es" on Forr	n 990. Pai	rt IV. line 26	or Form 9	990-E	Z. Part	t V. line (
(a) Name of interested person and purpose	(b) Loan			(c) Onginal principal amount (d) Balance of			· · · · · · · · · · · · · · · · · ·		(f) Approv	ed (g) or agre	Written eement?
	То	From			:		Yes	No	Yes I	lo Yes	No
											-
											+
					 						+
				· · · · · -				-			
Total		٠		. ▶ \$							
Part III Grants or Assistance Benef											
To be completed by organization	ations that	answe	red "Yes"	on Form	990, Part I	V, line 27	· <u>·</u>				
(a) Name of interested person	(b) Re	elationship	between inte organizat		son and the	(c) An	nount	of grant	t or type o	f assista	nce
					.	-		• • •		·	
										-	
				·							
Part IV Business Transactions Invo To be completed by organiza	_			on Form	990, Part I	V, line 28	a, 28	b, or	28c.		
(a) Name of interested person		(b) Relationship between interested person and the organization				unt of (d) Description of transaction				orga	Sharing of nization's enues?
			<u>.</u>							Ye	s No
Maurice Boisvert		Memb		 	180,861	Grants/	•	_		$\overline{}$	√
Linda A. Cavaioli		Memb	 		313,496	_					1
Laurie B. Ross, Ph.D.	Board	Memb	er		73,998	Grants/	Dono	or Des	ignatio	ns	+
											
				 		 				- -	+

SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008 Open to Pub

Employer identification number

04

Department of the Treasury Internal Revenue Service Name of the organization

United Way of Central Massachusetts

► 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.

Open to Public Inspection

2104017

OMB No 1545-0047

Part III, 4d - Other Programs -
Mass 2-1-1 - United Way of Central Massachusetts has partnered with other United Way's across the state, to establish
Mass 2-1-1 to help with non-life threatening needs. 2-1-1 is an easy to remember telephone number that connects callers
to information about health and human services available in their community. It serves as a resource for finding
government benefits and services, non-profit organizations, support groups, volunteer opportunities, donation programs,
and other local resources.
AFL-CIO Labor Community Services Program - The AFL-CIO Labor Community Services Program coordinates many
programs to benefit members of organized labor, their families and the community at large. Members of organized labor
participate in United Way's Day of Caring, organize the Handicapped Ramp Program, NALC food drive, the Holiday toy
drive and other special projects. One of the most important roles of the Labor Community Services Program is to design
and provide training sessions for union members, their families and other community partners. Volunteers from NALC
Branch 12 delivered 417,228 pounds of food to organizations serving the hungry in Central Massachusetts – the largest
amount to date.
Community Services Program
Volunteer Center - The United Way of Central Massachusetts supports a Volunteer Center internal to its operations. Since
1967, the Volunteer Center has been the primary portal for community members to engage in volunteerism. The Center is
an affiliate member of the Hands on Network and offers an array of services that build the capacity for effective
an affiliate member of the Hands on Network and offers an array of services that build the capacity for effective volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral,
volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral,
volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral, placement services, recognition activities and participates in strategic initiatives that mobilize volunteers to meet local
volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral, placement services, recognition activities and participates in strategic initiatives that mobilize volunteers to meet local needs. The Center also manages Volunteer Solutions an online database of volunteer opportunities in central
volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral, placement services, recognition activities and participates in strategic initiatives that mobilize volunteers to meet local needs. The Center also manages Volunteer Solutions an online database of volunteer opportunities in central Massachusetts. The following list represents unique volunteer opportunities offered by the Center.

_	•
Page	4

Name of the organization	Employer identification number
United Way of Central Massachusetts	04 2104017
people claim eligible tax credits. We are also working to build awareness about financial i	ssues such as predatory
lending practices, pay day loans, and predatory tax preparation services that further hind	er an individual's ability to save
and build assets.	
Calendar Program - A part of the Hands On Network model of volunteer engagement, a ca	lendar program offers
volunteers a monthly menu of "done in a day" projects that meet their interest and fit thei	r schedule. The model also
uses volunteers who are specially trained to lead other volunteers in service. A calendar	program focuses on team
oriented volunteering on a flexible basis.	
Youth Leadership Institute - This intensive program is designed to provide youth with the	encouragement, peer networks
and leadership skills necessary for them to make meaningful contributions to their comm	unities and begin a life-long
journey of leadership and service. The institute combines classroom instruction with con	nmunity service activities.
Day of Caring - The Volunteer Center at United Way of Central Massachusetts coordinates	s many events to promote
volunteerism and leadership. On September 16, 2008, we hosted our Annual Day of Carin	g, the largest one-day volunteer
drive in the entire region, where 1,097 people took to the streets of central Massachusetts	to volunteer at dozens of
locations for the day.	
Donor Designations - The United Way of Central Massachusetts facilitates the collection	and distribution of donor-
designated pledges and gifts to other 501(c)(3) nonprofit organizations. 392 agencies rec	eived donations totaling
\$768,126 in FY 2009.	

SCHEDULE O (Form 990)

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

Department of the Treasury Internal Revenue Service

Name of the organization
United Way of Central Massachusetts, Inc.

Employer identification number 04 2104017

Part VI - Section A - Line 10: The Finance Committee reviewed a draft version of the Form 990 and all supporting
schedules at its December 7, 2009 meeting. The full Board of Directors received a copy of the final version of the Form
990 and all supporting schedules to review in advance of it December 16, 2009 meeting. The document review is included
as an agenda item for that meeting.
Part VI - Section A - Line 11
Mark P. Bilotta, Colleges of Worcester Consortium Inc. 484 Main Street, Suite 500, Worcester, MA 01608
Maria Addison Director, Quinsigamond Community College, 670 West Boylston Street, Worcester, MA 01606-2092
Todd M. Bailey, Fallon Community Health Plan, 10 Chestnut Street, Worcester, MA 01608
Maurice Boisvert, YOU, Inc. 81 Plantation Street, Worcester, MA 01604
Michael F. Buckley, The Hanover Insurance Group 440 Lincoln Street, E10 Worcester, MA 01653
Brian Bullock, Town of Holden, 1204 Main Street Holden, MA 01520
Jack P. Calareso, Ph.D., Anna Maria College, 50 Sunset Lane Paxton, MA 01612
Joseph P. Carlson, United Steel Workers of America – District 4 100 Medway Road, Ste. 403, Milford, MA 01751
Linda A. Cavaioli, YWCA of Central MA, Inc. 1 Salem Square, Worcester, MA 01608
Brian M. Chandley, Southbridge Savings Bank, 253-57 Main Street, P.O. Box 370, Southbridge, MA 0155
Mark C. Crandall, TD Bank, 370 Main Street, Worcester, MA 01608
Sandra Ellis, Massachusetts Nurses Association, 12 County Road, Worcester, MA 01604
Joseph D. Freitas, The Hanover Insurance Group, Inc., 440 Lincoln Street, E10, Worcester, MA 01653
Bruce Gaultney, Worcester Telegram & Gazette, 20 Franklin Street, P.O Box 15012, Worcester, MA 01615
Dennis L. Irish, Vanguard Health Systems NE Market, 132 Turnpike Rd., Ste. 200, Southborough, MA 01772
Nancy Kidd Brown, Unum, 18 Chestnut Street, Worcester, MA 01608
Glenn Knowlton, Saint Gobain Abrasives, 1 New Bond Street, Worcester, MA 01615
Susan M. Mailman, Coghlin Electrical Contractors, Inc., 100 Prescott Street, Worcester, MA 01605
Michael J. Mulrain, Polar Beverages, 1001 Southbridge Street, Worcester, MA 01610
Wendy O'l eary 65 Chanin Road, Holden, MA, 01520

Schedüle O (Form 990) 2008			Page 2			
Name of the organization	Employer ide	ntification number				
·United Way of Central Massachusetts, Inc.	04	2104017				
Marcy Reed, National Grid, 40 Sylvan Road, Waltham, MA 02451			<u>-</u>			
Laurie B. Ross, Ph.D., Dept. of Intl' Dev., Community & Environ. Clark University 950 Main Street Worcester, MA 01610						
Elizabeth V. Young, 6 Rutland Circle, Worcester, MA 01609-1630						
						
			_			
						
		••••••				
	••		· -			
			· 			
						
						
		·	- -			

SCHEDULE O (Form 990)

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

2104017

Department of the Treasury Internal Revenue Service

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04

Part VI - Section B - Line 12 c - The Board of Directors annually sign a conflict of interest statement listing affiliations
with other organizations that could potentially pose a conflict of interest. Board members abstain from voting on issues
or recommendations related to those organizations.
Part VI - Section B - Line 15 b - The Executive Committee conducts an annual performance review of the CEO and
recommends any compensation adjustments to the full Board of Directors. Compensation for the Vice President of
Finance and Operations is determined by the CEO. All compensation is included in the organization's budget which is
reviewed by the Finance Committee and approved by the full Board of Directors.
Part VI - Section C - Line 19 - United Way of Central Massachusetts posts its annual audited financial statements and
its Form 990 and all supporting schedules on its web site. The documents are also available for public review at
the organization's office. The conflict of interest statements are not made available directly to the public, but
minutes from all board meetings including all votes taken are available to the public at the United Way of Central
Massachusetts office.
Continuation of Schedule I - Part IV - Donor Designations - Organizations receiving donor designations have been
screened to verify 501(c)(3) status and Patriot Act compliance.
Minor Capital Grants - Minor capital grants of up to \$5,000 were also awarded by a competitive process based on need.
Receipts of final purchases are required as documentation. The grants are approved by the full Board of Directors.

Schedule O (Form 990) 2008		Page 2				
Name of the organization United Way of Central Massachusetts, Inc.	Employe 04	r identification number 2104017				
Schedule I Codes and Definitions (column h):	04 ,	2104017				
Program Operating - A restricted grant made to an agency in support of the costs associated with a specific program						
that it operates.						
Minor Capital Grant - Grants up to \$5,000 awarded for purchases of minor capital items.						
Capacity Building - A restricted grant in support of costs associated with building organize	ational	capacity.				
Donor Designated - An unrestricted grant made to an agency at the direction of the donor(s) in support of its general operating costs.						
Donor Desg, 3rd Pty - An unrestricted grant made to an agency, at the direction of the donor(s), collected and paid						
directly to the agency by a 3rd party, in support of its general operating costs.						
Overhead Calculation:						
The standard formula for calculating the Overhead ratio among United Ways is as follows	:					
Core Form, Part IX, line 25, Column C (M&G Exp.) + Column D (Fundraising Exp.) divided by						
Core Form, Part VIII, Line 12, Column A (Total Revenue)						
For United Way of Central Massachusetts this calculation is as follows: (662,523 + 866,041) / 6,264,378 = 24.40%						
This percentage represents an increase of 2.52% due to the negative impact of its investment income during FY 2009.						
The actual administrative and fundraising expenses decreased by \$50,947 from the previous fiscal year.						
·		·				
		·				

United Way of Central Massachusetts, Inc.

Financial Statements and Supplementary Information as of and for the Years Ended June 30, 2009 and 2008 and Independent Auditors' Report

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	Page
INDEPENDENT AUDITORS' REPORT	1 .
FINANCIAL STATEMENTS AS OF AND FOR THE YEARS ENDED JUNE 30, 2009 AND 2008:	
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Statements of Activities	3 - 4
Statements of Functional Expenses	5 - 6
Statements of Cash Flows	7
Notes to Financial Statements	8 - 15



INDEPENDENT AUDITORS' REPORT

To the Board of Directors of United Way of Central Massachusetts, Inc. Worcester, Massachusetts

We have audited the accompanying statements of financial position of the United Way of Central Massachusetts, Inc. (the Organization; a non-profit organization) as of June 30, 2009 and 2008 and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the United Way of Central Massachusetts, Inc. as of June 30, 2009 and 2008, and the results of its operations, and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Stowe & Degon Luc

October 26, 2009

STATEMENTS OF FINANCIAL POSITION JUNE 30, 2009 AND 2008

		2009		2008
ASSETS				
Cash and cash equivalents	\$	529,599	\$	1,081,490
Pledges receivable, net		2,136,426		2,392,317
Accounts receivable and other assets		123,861		50,888
Investments		4,838,170		5,947,148
Beneficial interest in trust (Note 14)		449,856		601,152
Property and equipment, net		129,192	<u></u>	152,587
Total Assets	\$	8,207,104	\$	10,225,582
LIABILITIES AND NET ASSETS				
Accounts payable	\$	14,134	\$	15,414
Accrued expenses		193,411		131,666
Community impact grants payable (Note 13)		3,754,843		3,976,786
Women's initiative grants payable		180,356		175,000
Designations payable		340,683		511,838
Total Liabilities		4,483,427		4,810,704
Net Assets:				
Unrestricted		3,447,764		5,220,646
Temporarily restricted		215,913		134,232
Permanently restricted	***************************************	60,000	No facility and the Control of the C	60,000
Total Net Assets		3,723,677		5,414,878
Total Liabilities and Net Assets	\$	8,207,104	\$	10,225,582

See notes to financial statements.

STATEMENT OF ACTIVITIES YEAR ENDED JUNE 30, 2009

	Ur	restricted	nporarily estricted	Permanently Restricted		Total
Support and Revenue:						
Campaign Revenue	\$	6,043,269	\$ 476,777	\$ -	\$	6,520,046
Less.						
Designations		(768,126)	•	-		(768,126)
Administrative fees		(51,741)	-	-		(51,741)
Allowance for uncollectible pledges		(191,508)	-	_		(191,508)
Net assets released from restrictions		431,203	 (431,203)			
Net Campaign Revenue		5,463,097	45,574	-		5,508,671
Investment income (net of expenses)		82,142	-	-		82,142
Loss on sale of investments		(755,517)	-	-		(755,517)
Unrealized loss on investments		(1,130,279)	-	-		(1,130,279)
Change in beneficial interest in trust (Note 14)		(127,866)	-	-		(127,866)
Donor designation fees		73,858	-	-		73,858
Grant and sponsorship income		277,404	199,690	-		477,094
Rental income (loss) net of expense		(3,375)	-	-		(3,375)
Net assets released from restrictions		163,583	 (163,583)			 _
Total Support and Revenue	<u></u>	4,043,047	 81,681			4,124,728
Expenses:						
Community Impact Grants (Note 13)		2,965,258	 		_	2,965,258
Women's Initiative Grants (Note 13)		188,556	 			188,556
Other Grants/Sponsorships		179,172	 	-		179,172
Program Services						
Community Services *		117,213	-			117,213
Mass 211		79,320	-	-		79,320
Building Brighter Futures		13,699	•	-		13,699
Labor Community Services		104,604	•	-		104,604
Community Impact		343,763	-	-		343,763
Women's Initiative Community Impact		104,776	-	-		104,776
Worcester Youth Capacity Project		227,880	-	-		227,880
Other Programs		53,335	 			53,335
Total Program Services		1,044,590	 		_	1,044,590
Supporting Services		1,438,353	 			1,438,353
Total Expenses		5,815,929	 			5,815,929
Increase (Decrease) in Net Assets		(1,772,882)	 81,681			(1,691,201)
Net Assets - beginning		5,220,646	 134,232	60,000	·	5,414,878
Net Assets - ending	\$	3,447,764	\$ 215,913	\$ 60,000	\$	3,723,677

See notes to financial statements

STATEMENT OF ACTIVITIES YEAR ENDED JUNE 30, 2008

Support and Revenue: Campaign Revenue Less: Designations Administrative fees Allowance for uncollectible pledges Net assets released from restrictions Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense) Net assets released from restrictions	\$ 6,187,383 (873,951) (52,879) (172,570) 473,536 5,561,519 72,662 312,691	\$	409,540 - - (473,536) (63,996)	\$ - - -	\$	
Less: Designations Administrative fees Allowance for uncollectible pledges Net assets released from restrictions Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	\$ (873,951) (52,879) (172,570) 473,536 5,561,519 72,662	\$	(473,536)	\$ - - - -	\$	(873,951)
Designations Administrative fees Allowance for uncollectible pledges Net assets released from restrictions Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	 (52,879) (172,570) 473,536 5,561,519 72,662			-		(873,951) (52,879)
Administrative fees Allowance for uncollectible pledges Net assets released from restrictions Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	 (52,879) (172,570) 473,536 5,561,519 72,662			-		
Allowance for uncollectible pledges Net assets released from restrictions Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	 (172,570) 473,536 5,561,519 72,662			-		(52.970)
Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	 473,536 5,561,519 72,662					(24,017)
Net Campaign Revenue Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	 5,561,519 72,662			-		(172,570)
Investment income (net of expenses) Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	72,662		(63 006)			-
Gain on sale of investments Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	•		(02,730)	-		5,497,523
Unrealized gain on investments Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	312,691		_	-		72,662
Change in beneficial interest in trust (Note 14) Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)			-	-		312,691
Donor designation fees Grant and sponsorship income Rental income (loss) (net of expense)	406,243		-	-		406,243
Grant and sponsorship income Rental income (loss) (net of expense)	(34,956)		-	-		(34,956)
Rental income (loss) (net of expense)	42,437		-	-		42,437
	288,777		81,802	-		370,579
Net assets released from restrictions	(4,104)		-	-		(4,104)
	 89,802		(89,802)			
Total Support and Revenue	 6,735,071		(71,996)	-	_	6,663,075
Expenses:						
Community Impact Grants (Note 13)	 3,153,978					3,153,978
Women's Instative Grants (Note 13)	 186,000					186,000
Other Grants/Sponsorships	 58,665			-		58,665
Program Services						
Community services '	95,670		-	-		95,670
Mass 211	76,267		-	•		76,267
Building Brighter Futures	1,406		-	-		1,406
Labor Community Services	92,804		-			92,804
Community Impact	308,613		-	~		308,613
Women's Initiative Community Impact	142,824		-	~		142,824
Worcester Youth Capacity Project	 243,453					243,453
Total Program Services	 961,037		-			961,037
Supporting Services	 1,526,973					1,526,973
Total Expenses	 5,886,653		<u> </u>			5,886,653
Increase (Decrease) in Net Assets	 848,418		(71,996)			776,422
Net Assets - beginning	4,372,228					
Net Assets - ending	4,314,440	_	206,228	60,000		4,638,456

See notes to financial statements

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2009

			 ∙	PROG	PROGRAM SERVICES	/ICES								
			Bullding	Labor		Women's Initiative	Worcester		Total				Total	
	Community		Futures	Community Community Community	Community	Community	Capacity	Other	Program	Admin.			Support	
	Services	Mass 211 with Y	with Youth	Services	Impact *	Impact	Project	Programs	Services	& Finance	Marketing	Marketing Fundraising	Services	Total
Salanes and related expenses								,					9	
Salanes	08/'80		210	678,70	\$ 202,504	40,100	44,/43	•	412,131	208,803	284,0%	\$ 308,944		1,240,420
Payroll taxes	4,673	•	28	3,978	14,350	3,128	3,427	•	29,614	25,923	6,339	26,493	58,755	88,369
Health and other fringe benefits	11,584	1	148	13,560	64,154	10,364	9,547	•	109,357	85,839	20,880	82,256	188,975	298,332
Total salanes and related expenses	81,037		1,016	70,367	281,308	59,657	57,717		\$51,102	480,625	117,701	477,693	1,076,019	1,627,121
Other expenses,														
Professional fees and contract services	1,701	78,995	11,000	76	1,255	11	67,394	14,759	175,251	50,783	158	13,090	64,031	239,282
Internal program grants and sponsorships	•	•	•	•	•	•	100,000	25,000	125,000		•	•		125,000
Directors and Officers Insurance	٠	•	•	•	•		,	•	٠	3,103	•	•	3,103	3,103
Supplies	3,652	•	•	21,740	1,207	343	843	12,274	40,059	3,745	1,308	4,231	9,284	49,343
Telephone	1,053	•	•	730	3,406	685	•	•	5,874	4,676	1,515	4,529	10,720	16,594
Postage	2,468	•	•	393	761	191	35	•	4,448	2,914	1,122	6,318	10,354	14,802
Occupancy	6,897	•	•	4,783	22,303	4,481	•	•	38,464	31,330	616'6	29,654	70,903	109,367
Promotion and publicity	1,605	325	•	790	1,286	489	•	80	4,575	1,344	5,468	45,291	52,103	56,678
Programs and events	11,116	•	•	•	٠	33,678	•	842	45,636	•	11,807	34,044	45,851	91,487
Travel and professional development	445	•	1,683	837	8,804	4	1,891	380	14,044	7,223	892	5,789	13,904	27,948
Organization dues and subscriptions	188	•	•	•	81	•	•	•	569	1,776	162	71.17	2,649	2,918
Equipment rental and maintenance	792	•	•	550	3,113	516	•	•	4,971	8,390	1,139	5,598	15,127	20'02
Miscellaneous	•			.	,					373		250	623	623
Total other expenses	29,917	79,320	12,683	29,899	42,216	41,058	170,163	53,335	458,591	115,657	33,490	149,505	298,652	757,243
Total expenses before depreciation and matronal and state dues	110,954	79,320	13,699	100,266	323,524	100,715	227,880	53,335	1,009,693	596,282	151,191	627,198	1,374,671	2,384,364
					į				;			,		;
Depreciation	2,264		,	1,569	7,321	1,469			12,623	10,045	3,256	9,735	23,036	35,659
National and state dues	3,995			2,769	12,918	2,592		1	22,274	17,725	5,745	17,176	40,646	62,920
Total expenses	\$ 117,213	\$ 79,320	\$ 13,699	\$ 104,604	\$ 343,763	\$ 104,776	\$ 227,880	\$ 53,335	\$ 1,044,590	\$ 624,052	\$ 160,192	\$ 654,109	\$ 1,438,353	\$ 2,482,943
See notes to financial statements.														

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2008

			•	PROGRAM	PROGRAM SERVICES	m							
			Bullding			Women's	Worcester						
			Brighter	Labor		Initiative	Youth	Total				Total	
	Community		Futures	Community	Community Community	O	•	Program	Admin.			Support	
	Services	Mass 211	with Youth	Services	Impact *	Impact	Project	Services	& Finance	Marketing	Marketing Fundraising	Services	Total
Salancs and related expenses	\$ 40.037	v	\$ 1.067	081 27	201 451	299 15	01.730	105 741	348 345	30000	330.66	9	1 300 743
2014100		9			•			•			•	~	7 80'007'1 4
Payroll laxes	3,573	•	28	3,581	14,003	3,585	3,306	28,106	23,711	5,816	26,746	56,273	84,379
Health and other frange benefits	9.979		272	11,993	46,006	11,175	9,235	88,660	78,283	19,239	80,265	177,787	266,447
Total salanes and related expenses	64,489		1,397	62,954	261,460	66,427	55,780	512,507	450,259	111,040	477,667	1,038,966	1,551,473
Other expenses.													
Professional fees and contract services	655	75,667	•	92	325	30,946	84,651	192,320	43,274	2,994	34,083	80,351	272,671
Internal program grants and sponsorships	•	•	•	•	•	•	100,000	100,000	•	•	٠	٠	100,000
Directors and Officers Insurance	•	•	•	•	•	•	•	•	7,851	•	•	7,851	7,851
Supplies	3,546	•	•	18,731	2,589	350	834	26,050	4,861	17,542	9,900	29,303	55,353
Telephone	884	٠	•	883	3,800	295	•	6,134	5,981	2,270	4,824	13,075	19,209
Postage	2,068	•	٠	453	715	1,575	•	4,811	2,344	1,271	9,408	13,023	17,834
Occupancy	4,793	•	4	4,793	20,610	3,078	•	33,278	32,857	12,326	56,169	71,352	104,630
Promotion and publicity	3,460	009	•	431	2,476	4,824	•	11,791	968'1	9,615	66,153	77,664	89,455
Programs and events	11,023	•	•	•	•	32,402	•	43,425	•	17,614	43,884	61,498	104,923
Travel and professional development	1,236	•	•	198'1	3,733	378	2,188	965'6	8,311	2,230	9,454	566'61	29,391
Organization dues and subscriptions	•	•	•	•	443	•	•	443	1,863	188	1,142	3,193	3,636
Equipment resstal and maintenance	909	•	5	605	2,602	389	•	4,206	8,927	1,555	5,468	15,950	20,156
Miscellaneous				1	450			450	1,123		239	1,362	1,812
Total other expenses	28,270	76,267	6	27,833	37,743	74,509	187,673	432,304	119,288	67,605	207,724	394,617	826,921
Total expenses before depreciation													
and national and state dues	92,759	76,267	1,406	90,787	299,203	140,936	243,453	944,811	569,547	178,645	168,391	1,433,583	2,378,394
Depreciation	2,911	1		2,017	9,410	1,888	•	16,226	12,911	4,185	12,513	29,609	45,835
National and state dues		1	1			•	•		63,781			63,781	63,781
Total expenses	\$ 95,670	\$ 76,267	\$ 1,406	\$ 92,804	\$ 308,613	\$ 142,824	\$ 243,453	\$ 961,037	\$ 646,239	\$ 182,830	\$ 697,904	\$ 1,526,973	\$ 2,488,010
See notes to financial statements													

STATEMENTS OF CASH FLOWS YEARS ENDED JUNE 30, 2009 AND 2008

	2009	2008
CASH FLOWS FROM OPERATING ACTIVITIES:		
Increase (decrease) in net assets	\$ (1,691,201)	\$ 776,422
Adjustments to reconcile change in net assets to net cash		
used in operating activities:		
Depreciation	35,659	45,835
Allowance for uncollectible pledges	7,184	(78,304)
Realized and unrealized net loss (gain) on investments	1,885,796	(718,934)
Changes in operating assets and liabilities:		
Pledges receivable	248,707	55,159
Accounts receivable and other assets	(72,973)	57,538
Accounts payable	(1,280)	(69,158)
Accrued expenses	61,745	18,642
Community impact grants payable	(221,943)	(117,758)
Women's initiative grants payable	5,356	(4,933)
Designations payable	(171,155)	82,955
Net cash provided by operating activities	85,895	47,464
CASH FLOWS FROM INVESTING ACTIVITIES:		
Acquisition of property and equipment	(12,264)	(2,083)
Acquisition of investments	(5,532,818)	(7,442,973)
Proceeds from sale of investments	4,756,000	7,010,579
Change in beneficial interest trust	151,296	60,470
Net cash used in investing activities	(637,786)	(374,007)
NET DECREASE IN CASH AND CASH EQUIVALENTS	(551,891)	(326,543)
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	1,081,490	1,408,033
CASH AND CASH EQUIVALENTS, END OF YEAR	\$ 529,599	\$ 1,081,490

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS YEARS ENDED JUNE 30, 2009 AND 2008

1. ORGANIZATION

United Way of Central Massachusetts (the "Organization") is a not-for-profit organization striving for excellence in meeting the human service needs of the community through the development and effective distribution of resources. The Organization is classified as a public charity and is exempt from federal income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation - The Organization reports information regarding its financial position and activities according to three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Cash and Cash Equivalents - The Organization considers all highly liquid debt instruments purchased with maturities of three months or less to be cash equivalents. The Organization places its cash and cash equivalents with various financial institutions. At times such investments may be in excess of Federal Deposit Insurance Corporation (FDIC) insurance limits.

Investments - Investments in marketable securities with readily determinable fair values and all investments in debt securities are valued at their fair values in the statement of financial position. Unrealized gains and losses are included in the Statement of Activities.

Property and Equipment - Property and equipment are stated at cost or, if donated, at the approximate fair market value at the date of donation. The Organization follows the practice of capitalizing all expenditures for property and equipment in excess of \$1,000. Depreciation is provided on a straight-line basis over the following estimated useful lives:

	YEARS
Building and improvements	15 – 25
Equipment	3 – 5
Furniture and fixtures	10

Contributions - Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Time restricted contributions are reported as temporarily restricted support and reclassified to unrestricted net assets upon expiration of the time restriction.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Contributions (Continued) - Donors may designate their gifts to specific United Way affiliated and non-affiliated agencies. Non-affiliated agencies are required to provide the Organization with documentation of their tax-exempt status. Donor designations to specific agencies are not included in net campaign revenues and support or allocations to participating agencies in the accompanying Statements of Activities.

A substantial number of volunteers and corporations have donated significant time and services for which no amounts have been reflected in the financial statements. The Organization reflects only amounts for services that create or enhance non-financial assets, or that require specialized skills and are provided by individuals possessing those skills. No such services were donated during 2009 and 2008.

Designations - Agency-specific designations as specified by the donor are recorded upon receipt of the contribution and are reflected as an expense in the Statement of Activities and, until distributed to the agency, as a liability in the Statement of Financial Position.

Donated Assets - Donated marketable securities and other non-cash donations are recorded as contributions at their estimated fair value at the date of the donation.

Advertising - Advertising costs are generally charged to operations as incurred. These costs were approximately \$2,000 and \$4,700 in 2009 and 2008, respectively.

Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Although these estimates are based on management's knowledge of current events and actions it may undertake in the future, they may ultimately differ from actual results. The Organization's most significant estimate is the allowance for uncollectible pledges.

Reclassifications - Certain 2008 amounts have been reclassified to conform to the 2009 presentation.

3. PLEDGES RECEIVABLE

Pledges receivable consists of the following at June 30:

2009		2008
\$ 2,071,114	\$	-
65,312		2,336,843
 		55,474
\$ 2,136,426	\$	2,392,317
\$ 	\$ 2,071,114 65,312	\$ 2,071,114 \$ 65,312

Pledges receivable are shown net of an allowance for uncollectible pledges of \$597,431 and \$590,247 in 2009 and 2008, respectively.

4. INVESTMENTS

Investments are stated at fair value and consist principally of equity and debt securities. Fair values and unrealized appreciation at June 30, are summarized as follows:

			2009		
				U	Inrealized 🖰 👚
				Αp	preciation/
	 Cost	_ F	air Value	(De	epreciation)
Equity	\$ 1,881,034	\$	2,062,684	\$	181,650
Debt	 2,732,578		2,775,486		42,908
	\$ 4,613,612	\$	4,838,170	\$	224,558
			2008		
				U	Inrealized
				Αp	preciation/
	 Cost	<u>F</u>	air Value		epreciation)
Equity	\$ 2,612,151	\$	3,962,895	\$	1,350,744
Debt	 1,980,160		1,984,253		4,093
	\$ 4,592,311	\$	5,947,148	\$	1,354,837

The Organization recorded net losses of \$755,517 and net gains of \$312,691 from the sale of investments during 2009 and 2008, respectively. The Organization incurred investment custodial and advisory fees of \$38,468 and \$52,535, during 2009 and 2008, respectively.

5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

	2009	2008
Building and Improvements	\$ 1,141,425	\$ 1,141,425
Equipment	421,300	409,036
Furniture and Fixtures	204,916	204,916
	1,767,641	1,755,377
Accumulated Depreciation	(1,638,449)	(1,602,790)
	\$ 129,192	\$ 152,587

Depreciation expense was \$35,659 and \$45,835 in 2009 and 2008, respectively.

6. LINE OF CREDIT

On October 31, 2001, the Organization entered into an unsecured line of credit agreement with an available borrowing limit of \$1,000,000. The line of credit bears interest at prime rate (3.25% at June 30, 2009). The line of credit expires in January 2010. There were no outstanding borrowings as of June 30, 2009 and 2008.

7. RESTRICTIONS ON ASSETS

Temporarily restricted net assets at June 30 are restricted for the following purposes:

		2009		2008
Future campaign revenue	\$	20,000	\$	20,000
Small capital grant awards		58,810		56,952
Ramp program		26,356		20,173
Investing in Girls		46,811		-
Facebook grant		2,000		-
Women's Initiative		61,936		37,107
	\$_	215,913	<u>\$</u>	134,232

At June 30, 2009 and 2008, permanently restricted net assets of \$60,000 are in an endowment fund, the income from which is expendable to support any activities of the Organization.

8. NET ASSETS RELEASED FROM RESTRICTIONS

Temporarily restricted net assets were released for the following purposes:

	2009		2008
Future campaign revenue	\$ 20,000	\$	10,000
Women's Initiative	376,561		436,106
Small capital grant awards	53,142		53,745
Programs and events	 145,083		63,487
•	\$ 594,786	\$_	563,338

9. GROSS CAMPAIGN REVENUE

Gross campaign revenue by campaign year (October 1 – September 30) consists of the following:

	Campaign 2009		ampaign 2008	Campaign 2007		
June 30, 2009	\$ 20,000	\$	6,420,524	\$	79,522	
June 30, 2008	-		20,000		6,507,070	
June 30, 2007	 <u>-</u>				10,000	
	\$ 20,000	\$	6,440,524	\$	6,596,592	

10. RENTAL INCOME

The Organization owns office condominium space, which it leased during 2009 and 2008. Gross rental payments received were \$53,487 and \$51,103 during 2009 and 2008, respectively. Rental income is shown net of condominium fees and other rental expenses of \$56,862 and \$55,207, during 2009 and 2008, respectively.

10. RENTAL INCOME (CONTINUED)

The carrying value of the property held for lease was as follows:

	2009	2008
Building and Improvements	\$ 191,095	\$ 191,095
Less: Accumulated Depreciation	 (172,919)	 (166,710)
	\$ 18,176	\$ 24,385

11. LEASE COMMITMENTS

The Organization leases office equipment under operating lease agreements. The office equipment leases expire at various times through February 2012. Total expense under the office equipment leases amounted to \$8,748 and \$9,327 in 2009 and 2008, respectively.

The following is a schedule of future minimum lease payments for the next three years as of June 30, 2009.

Year	Α	mount	
2010	\$	9,327	
2011		7,373	
2012		1,200	
	\$	17,900	

12. EMPLOYEE BENEFIT PLAN

The Organization maintains a contributory retirement plan covering all eligible employees. Each year the Organization at its discretion may make an employer contribution to the plan. The employer's contribution is determined annually, by the Board of Directors. The employer's contribution charged to expense was approximately \$27,900 and \$33,700 in 2009 and 2008, respectively.

In addition, incorporated into the plan are the provisions of Section 401(k) of the Internal Revenue Code, which allows employees to contribute to their accounts on a pretax basis. The Organization may make a discretionary match contribution up to a maximum of 2% of employees' annual compensation. The match contribution for 2009 and 2008 was approximately \$15,900 and \$17,200, respectively.

13. COMMUNITY IMPACT AND WOMEN'S INITIATIVE

Community Impact grants of unrestricted funds to selected programs are determined annually by the Board of Directors based on recommendations from the Community Impact Committee. Women's Initiative grants and sponsorships are also determined by the Board of Directors based on recommendations from the Women's Initiative Community Investment Committee. Grants are payable on a monthly basis during subsequent fiscal years. Sponsorships are paid based on the timing of the sponsored events.

13. COMMUNITY IMPACT AND WOMEN'S INITIATIVE (CONTINUED)

In accordance with Statement of Financial Accounting Standards No. 116 "Accounting for Contributions Received and Contributions Made" the Organization recognizes the full amount of the committed grant as an expense in the year in which the commitment is made.

14. GREATER WORCESTER COMMUNITY FOUNDATION FUNDS

The following funds, except as discussed, are considered assets of the Greater Worcester Community Foundation ("GWCF") and therefore are not included in the financial statements of the United Way of Central Massachusetts, Inc. The information is included for disclosure purposes only.

The Arthur J. Remillard, Jr. Fund

The Arthur J. Remillard, Jr. Fund (AJR Fund) is a donor-designated fund established at the Greater Worcester Community Foundation ("GWCF") to provide financial support to the Organization. A three-person advisory board, consisting of the chief executive officer, a current or past president of the Board of Directors of United Way of Central Massachusetts, Inc. and a current or past president of the Board of Directors of the Greater Worcester Community Foundation, determines the annual pledge to the Organization. As of and for the years ended June 30, 2009 and 2008, the AJR Fund had a fair market value of \$487,814 and \$649,144, respectively.

United Way of Central Massachusetts Fund

In August of 1987 the Organization established the United Way of Central Massachusetts Fund ("the Fund") at GWCF. The purpose of the Fund is to provide additional financial support for participating agencies of the Organization and to underwrite administrative costs of the Organization. The Fund consists of an amount contributed by the Organization, having a market value of \$449,856 and \$601,152 as of June 30, 2009 and 2008, respectively. In accordance with the provisions of Statement of Financial Accounting Standards ("SFAS") No. 136 "Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others", the Organization's initial contribution to the United Way of Central Massachusetts Fund (the "Fund") is reflected as an asset ("Beneficial interest in trust") on the Statement of Financial Position.

In addition to the original contribution by the Organization other significant contributions have since been received. The Organization and participating agencies are designated beneficiaries of these contributions, however variance power and ultimate control resides with GWCF board of directors. Accordingly, the market values of the contributions are reported as assets of GWCF. The market value of the assets included in the Fund and controlled by GWCF is equal to \$2,073,815 at June 30, 2009 and \$2,754,899 at June 30, 2008.

15. FAIR VALUE MEASUREMENTS

The Organization adopted the provisions of Statement of Financial Accounting Standards No. 157, "Fair Value Measurements" ("SFAS 157") for financial assets and liabilities recognized on a recurring basis. SFAS 157 defines fair value, establishes a framework for measuring fair value and expands the disclosure requirements for fair value measurements. The adoption of FAS 157 for financial assets and liabilities did not have a material impact on the Organization's financial statements.

In determining the fair value measurements of financial assets and liabilities, the Organization considered the principal and most advantageous market in which the Organization transacts and considered the assumptions that market participants would use when pricing the financial asset and liability. In accordance with SFAS 157, the Organization maximizes the use of observable inputs and minimizes the use of unobservable inputs when measuring fair value.

The hierarchies of inputs required by FAS 157 are as follows:

- Level 1: Input prices quoted in an active market for identical financial assets or liabilities.
- Level 2: Inputs other than prices quoted in Level 1, such as prices quoted for similar financial assets and liabilities in active markets, prices for identical assets and liabilities in markets that are not active or other inputs that are observable or can be corroborated by observable market data.
- Level 3: Input prices quoted that are significant to the fair value of the financial assets or liabilities which are not observable nor supported by an active market.

The following items are measured at fair value on a recurring basis at June 30, 2009:

	Level 1	Level 2	Level 3		<u>Total</u>
Mutual funds	\$ 2,775,487	\$ -	\$ -	\$	2,775,487
Equity securities	2,062,683	-	-		2,062,683
Beneficial interest in trust	 	 	 449,856		449,856
	\$ 4,838,170	\$ _	\$ 449,856	<u>\$</u>	5,288,026

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended June 30, 2009.

	Beneficial interest in trust			
Balance, beginning of year Earnings and investment gains/lossses, net of	\$	601,152		
investment fees Grants authorized		(125,355) (23,430)		
Administrative fees		(2,511)		
Balance, end of year	<u>\$</u>	449,856		

16. CONTINGENCIES

The United Way of Central Massachusetts owns and occupies condominium space in a building in Worcester, Massachusetts. The Organization is the largest owner of the condominium space, owning fifteen percent. Due to the age of the building, the Organization may be subject to special assessments to maintain and repair the building. As of June 30, 2009, the Organization is unable to estimate the extent of or dollar amount of future special assessments. The special assessments, when they occur, may have a material impact on the Organization's financial statements.

The Organization may become involved in litigation or other claims in the ordinary course of business. Management is not aware of any claims that will have a material adverse effect on the financial condition of the Organization.

* * * *

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CEO/CFO Financial Statement Certification

CERTIFICATIONS

I hereby certify that:

- 1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2009.
- 2. Based on my knowledge, these financial statements do not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading.
- 3. Based on my knowledge, the financial statements and other financial information included in this report, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2009.

President and Chief Executive Officer

Date Feb. 12, 2010

Vice President, Finance and Operations

Date Fx3. 12, 2010

484 Main Street, Suite 300 Worcester, MA 01608-1880 Phone: 508-757-5631 Fax:: 508-757-2712 www.unitedwaycm.org



Sub-Certification of Financial Statements

CERTIFICATIONS

I hereby certify that:

- 1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2009.
- 2. I have disclosed to our organization's auditors all relevant controls and procedures established to assure the accuracy and integrity of information provided by my team;
- 3. I have reported to the Audit Committee any known or observed deficiencies in internal controls or fraud involving management;
- 4. Based on my knowledge, the portions of the financial statements that are based on information originating from my team do not contain any untrue statement of a material fact or omit to state a material fact necessary to ensure that the statements made, in light of the circumstances under which such statements were made, are not misleading;
- 5. Based on my knowledge, the financial statements and other financial information included in this report that pertain to information originating from my team, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2009.

President and Chief Executive Officer

Date tub. 12, 2010

Vice President, Finance and Operations

Date FEB 12, 2010