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

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

OMB No 1545-0047
2008
 Open to Public Inspection

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

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
 United Way of East Central Iowa Inc
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
 1030 5th Ave SE No 100
 City or town, state or country, and ZIP + 4
 Cedar Rapids, IA 52403

D Employer identification number
 42-0861239
E Telephone number
 (319) 398-5372
G Gross receipts \$ 12,492,921

F Name and address of Principal Officer
 Lois Buntz
 1030 5th Ave SE No 100
 Cedar Rapids, IA 52403

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 (If "No," attach a list See instructions)
H(c) Group Exemption Number ▶

I Tax-exempt status 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

J Web site: ▶ www.uweci.org

K Type of organization Corporation trust association other ▶

L Year of Formation 1914 | **M** State of legal domicile IA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities Unite the caring power of communities to invest in effective solutions to improve lives		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	38
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	37
	5 Total number of employees (Part V, line 2a)	5	31
	6 Total number of volunteers (estimate if necessary)	6	250
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	9,891,781	11,787,490
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	75,333	81,508
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	210,162	65,372
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	158,144	119,884
		10,335,420	12,054,254
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,449,380	9,800,866
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,159,508	1,306,947
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b (Total fundraising expenses, Part IX, column (D), line 25 <u>529,479</u>)		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	528,645	602,082
18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	13,137,533	11,709,895	
19 Revenue less expenses Subtract line 18 from line 12	-2,802,113	344,359	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	9,837,554	9,792,827
	22 Net assets or fund balances Subtract line 21 from line 20	7,542,821	7,378,425
	2,294,733	2,414,402	

Part II Signature Block

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

Please Sign Here
 Signature of officer: ***** Date: 2009-12-14
 Lois Buntz President/CEO
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: Beth A Kielts CPA Date: _____ Check if self-employed:
 Preparer's PTIN (See Gen Inst)
 Firm's name (or yours if self-employed), address, and ZIP + 4: CLIFTON GUNDERSON LLP
 1715 1ST AVENUE SE
 CEDAR RAPIDS, IA 52402
 EIN: _____ Phone no: (319) 363-2697

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

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission

See Additional Data Table

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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 \$ 2,548,407 including grants of \$ 2,548,407) (Revenue \$)
 EDUCATION Helping children and youth achieve their potentialCommunity Strategies Born Learning Public engagement campaign that helps parents, caregivers, and communities create quality learning opportunities for young children The UWECI Young Leaders Society is sponsoring Born Learning Their accomplishments to date Distribution of Born Learning materials through St Luke and Mercy Hospital newborn home visitation program Installation of the Born Learning Trail at Bever Park and in Amana Distribution of Born Learning materials through partner agencies early childhood programs and area librariesQuality Child Care and Family Support Agency partners are providing opportunities for low income families to access quality child care and family support programs to help young children achieve school readiness Accomplishments thus far include 70 child care center and home providers working towards targeted quality improvements, affecting 2500 children Over 350 parents participating in regular family support programsReady by 21 Ready for College, Work, and Life Ready by 21 is a national initiative to insure that young people have the supports, opportunities and services needed to prosper and contribute where they live, work, play and make a difference Local accomplishments include Youth agency participation in the Youth Program Quality Assessment Organization of community stakeholders Surveying and mapping of local youth development programs

4b (Code) (Expenses \$ 2,108,288 including grants of \$ 2,108,288) (Revenue \$)
 HEALTH Improving health and access to healthcare for peopleCommunity StrategiesOver 32,000 persons have no health insurance in the UWECI service area United Way is committed to improving the health of people through funded strategies that offer Nutritious meals for seniors to remain independent Access to healthcare services through transportation options Access to mental health and substance abuse treatment programsWomens Leadership Initiative Provides financial assistance for women to cover prescription costs and emergency dental assistance

4c (Code) (Expenses \$ 1,939,980 including grants of \$ 1,939,980) (Revenue \$)
 INCOME Promoting financial stability and independenceCommunity StrategiesFamily Financial Stability UWECI is helping low-income families increase their income, build savings and gain and sustain assets Strategies that assist families in achieving financial stability and independence include housing and food assistance, case management, financial education, credit repair and debt reduction counseling, employment training and support, accessing public and employer benefits, savings campaigns and Earned Income Tax Credit (EITC) Earned Income Tax Credit The Earned Income Tax Credit (EITC) is the largest and most effective federal aid program in the nation for low-income workers EITC is a state and federal income tax credit available to working individuals and families making less than \$40,000 Nationwide, 63.4% of EITC recipients use their tax credit to pay current bills or debt, 20% use it to gain assets such as a car, house, or education 2-1-1 - Connecting residents to Volunteer Income Tax Assistance 2-1-1 continues to be a critical resource to our community, connecting residents to needed services 2-1-1 continues to connect individuals to free tax preparation sites Above that, 2-1-1 schedules tax assistance appointments for AARP and VITA Last year, 2-1-1 scheduled over 3,700 appointments, efficiently connecting low-income families to a service that brings dollars back to our community This year 2-1-1 added tax scheduling services for Blackhawk, Jones and Iowa counties In 2008, volunteer tax preparers assisted with filing over 3,700 tax returns, a 35% increase over 2007 In 2008, over 1.2 million dollars was claimed in EITC

(Code) (Expenses \$ 3,803,163 including grants of \$ 3,204,191) (Revenue \$)









4d Other program services (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 10,399,838 *Must equal Part IX, Line 25, column (B).*

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
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 <input checked="" type="checkbox"/>		No
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II <input checked="" type="checkbox"/>	Yes	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I <input checked="" type="checkbox"/>		No
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		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III <input checked="" type="checkbox"/>		No
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 <input checked="" type="checkbox"/>		No
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V <input checked="" type="checkbox"/>	Yes	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable <input checked="" type="checkbox"/>	Yes	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII <input checked="" type="checkbox"/>	Yes	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the U S?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part I		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		No
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		No
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		No
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II <input checked="" type="checkbox"/>	Yes	
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 <input checked="" type="checkbox"/>		No
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		No
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 24b-24d and complete Schedule K. If "No," go to question 25		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		No
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		No
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		No
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		No

Part IV Checklist of Required Schedules *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> 		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> 	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> 		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 31		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		No
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)?		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		No
b	If "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?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		No
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
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	<i>Section 501(c)(7) organizations.</i> 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	<i>Section 501(c)(12) organizations.</i> 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	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

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

Section A. Governing Body and Management

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

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	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?		No
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?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
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		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O	Yes	
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?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed _____
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> own website <input checked="" type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization Kristine Riley 1030 5th Ave SE No 100 Cedar Rapids, IA 52403 (319) 398-5372

Part VIII Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a 28,580					
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 11,758,910 1f					
	g	Noncash contributions included in lines 1a-1f \$ 81,827					
	h	Total (Add lines 1a-1f)	11,787,490				
Program Service Revenue	2a	Donor Designation Fees Business Code 900,099	81,508	81,508			
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f g \$ 81,508					
Other Revenue	3	Investment income (including dividends, interest other similar amounts)	130,227			130,227	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross Rents	(i) Real				
			(ii) Personal				
			Less rental expenses				
			Rental income or (loss)				
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	373,812			
			(ii) Other				
			Less cost or other basis and sales expenses	438,667			
			Gain or (loss)	-64,855			
	d	Net gain or (loss)	-64,855			-64,855	
	8a	Gross income from fundraising events (not including \$ 7,174 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a					
			Less direct expenses b				
Net income or (loss) from fundraising events c			7,174			7,174	
9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a						
		Less direct expenses b					
		Net income or (loss) from gaming activities c					
10a	Gross sales of inventory, less returns and allowances a						
		Less cost of goods sold b					
		Net income or (loss) from sales of inventory c					
Miscellaneous Revenue Business Code							
11a	Sponsorships 900,099	103,445			103,445		
b	Other Support 900,099	9,265			926,458		
c							
d	All other revenue _____						
e	Total. Add lines 11a-11d \$ 112,710						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	12,054,254	81,508	0	185,256		

Part IX Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	9,800,866	9,800,866		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	288,065	95,699	156,000	36,366
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	834,975	299,500		271,059
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	69,790	20,524	25,060	24,206
9	Other employee benefits	40,596	9,690	6,824	24,082
10	Payroll taxes	73,521	25,993	26,288	21,240
11	Fees for services (non-employees)				
a	Management				
b	Legal	5,576		5,576	
c	Accounting	28,545		28,545	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	47,627	12,620	33,383	1,624
12	Advertising and promotion	17,902	589	7,313	10,000
13	Office expenses	42,878	14,602	16,056	12,220
14	Information technology	27,104	8,324	11,543	7,237
15	Royalties				
16	Occupancy	75,934	27,313	28,526	20,095
17	Travel	6,991	4,913	493	1,585
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	20,621	8,510	6,781	5,330
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,286	4,767	6,260	4,259
23	Insurance				
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	National Dues	97,844	34,045	36,539	27,260
b	Publications, Printing	83,008	1,194,491	42,563	28,500
c	Special Projects	67,442	1,185,116	33,696	21,895
d	Donated Materials	33,055		3,305,539	
e	Other Expenses	27,876	7,612	10,023	10,241
f	All other expenses	4,393	475	1,638	2,280
25	Total functional expenses. Add lines 1 through 24f	11,709,895	10,399,838	780,578	529,479
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	99	1	100
	2 Savings and temporary cash investments	3,440,645	2	3,331,815
	3 Pledges and grants receivable, net	4,393,509	3	4,783,194
	4 Accounts receivable, net	54,871	4	16,616
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	14,756	9	17,229
	10a Land, buildings, and equipment cost basis			
		10a 390,874		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 329,055	33,765	10c 61,819
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	1,413,926	12	1,114,513
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	485,983	15	467,541	
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,837,554	16	9,792,827	
Liabilities	17 Accounts payable and accrued expenses	284,687	17	217,103
	18 Grants payable	7,257,771	18	7,161,144
	19 Deferred revenue	363	19	178
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>		25	
	26 Total liabilities. Add lines 17 through 25	7,542,821	26	7,378,425
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	725,364	27	753,645
	28 Temporarily restricted net assets	1,225,718	28	1,317,106
	29 Permanently restricted net assets	343,651	29	343,651
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	2,294,733	33	2,414,402	
34 Total liabilities and net assets/fund balances	9,837,554	34	9,792,827	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A (Form 990 or 990EZ)

Public Charity Status and Public Support

2008

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization

United Way of East Central Iowa Inc

Employer identification number

42-0861239

Part I Reason for Public Charity Status (to be completed by all organizations) (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).
2 A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)
3 A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)
4 A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II)
6 A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II)
8 A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)
10 An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
a Type I b Type II c Type III - Functionally Integrated 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)
f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
(ii) a family member of a person described in (i) above?
(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Table with 2 columns: Yes, No. Rows 11g(i), 11g(ii), 11g(iii)

h Provide the following information about the organizations the organization supports

Table with 7 columns: (i) Name of Supported Organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col (i) listed in your governing document?, (v) Did you notify the organization in col (i) of your support?, (vi) Is the organization in col (i) organized in the U S?, (vii) Amount of support? Includes sub-columns for Yes/No for (iv) and (v).

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	7,892,175	8,477,301	8,940,387	10,689,952	11,787,491	47,787,306
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3	7,892,175	8,477,301	8,940,387	10,689,952	11,787,491	47,787,306
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						15,137,635
6 Public Support subtract line 5 from line 4						32,649,671

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	7,892,175	103,052	8,940,387	10,689,952	11,787,491	47,787,306
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	54,594	103,052	140,557	323,630	130,227	752,060
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	38,595	4,187	48,422	194,892	119,884	405,980
11 Total Support (Add lines 7 through 10)						48,945,346
12 Gross receipts from related activities, etc (See instructions)					12	371,082
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	66 710 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	67 680 %

- 16a 33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total Support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	16	

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	18	

- 19a 33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)

- Section 501(c)(4), (5), or (6) organizations complete Part III

Name of the organization United Way of East Central Iowa Inc

Employer identification number

42-0861239

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

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

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

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

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt function activities \$
3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's internal funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

- A** Check if the filing organization belongs to an affiliated group
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is:		
Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a Enter -0- if line g is more than line a		
i Subtract line 1f from line 1c Enter -0- if line f is more than line c		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line d, column (e))					
f Grassroots lobbying expenditures					

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines c through i)?		No	
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?	Yes		9,567
g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		No	
i Other activities. If "Yes," describe in Part IV		No	
j Total lines 1c through 1i			9,567
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes" enter the amount of any tax incurred under section 4912			
c If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

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

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
Part II-B, Line 1	Explanation of Other Lobbying Activities	United Way of East Central Iowa works with United Ways of Iowa on lobbying activities. Each member of United Way contributes a portion of their revenue to support a hired lobbyist to work on behalf of United Ways of Iowa.

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

United Way of East Central Iowa Inc

Employer identification number

42-0861239

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate contributions, aggregate grants, and aggregate value.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes...

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet...

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

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
(i) Revenues included in Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

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

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

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

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

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

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

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

b If "Yes," explain why in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	1,413,926				
b Contributions	400				
c Investment earnings or losses	-252,483				
d Grants or scholarships					
e Other expenditures for facilities and programs	44,046				
f Administrative expenses	3,284				
g End of year balance	1,114,513				

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

- a** Board designated or quasi-endowment ▶ 26 560 %
- b** Permanent endowment ▶ 42 610 %
- c** Term endowment ▶ 30 830 %

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		66,519	66,519	0
d Equipment				
e Other		324,355	262,536	61,819
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				61,819

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,054,254
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,709,895
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	344,359
4	Net unrealized gains (losses) on investments	4	-189,120
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-35,570
9	Total adjustments (net) Add lines 4 - 8	9	-224,690
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	119,669

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

1	Total revenue, gains, and other support per audited financial statements	1	10,651,009
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-189,120
b	Donated services and use of facilities	2b	14,004
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-175,116
3	Subtract line 2e from line 1	3	10,826,125
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	1,228,129
c	Add lines 4a and 4b	4c	1,228,129
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	12,054,254

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

1	Total expenses and losses per audited financial statements	1	10,531,340
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	14,004
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	14,004
3	Subtract line 2e from line 1	3	10,517,336
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	1,192,559
c	Add lines 4a and 4b	4c	1,192,559
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	11,709,895

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The endowments of the organization consist of various funds established to support the general operating needs of the Organization. Its endowments consist of both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. Permanently restricted net assets consists of \$343,651 of endowments which must be invested in perpetuity, the income from which is expendable to support the operations of the Organization.

Schedule I (Form 990)

OMB No 1545-0047

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

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization United Way of East Central Iowa Inc

Employer identification number 42-0861239

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000.

Table with 8 columns: (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, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

- 2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.
See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Program Expense Partner Agencies are required to submit written mid-year and end-of-year reports where they describe their progress towards the outcome goals they committed to upon receipt of funding Agencies report number served, activities and outcomes for the target population (i e number who experienced a measured change in condition during the funding period) Agencies also submit financial statements and IRS 990 documents that are reviewed by volunteer teams during each funded period Donor Designation 501(c)3 tax determination letters and Anti-Terrorism Compliance (PATRIOT Act) forms are required for all agencies before payout is issued IRS watch list websites are reviewed to verify agency is not involved in or supportive of terrorist activity Flood Recovery Agencies are required to submit reports where they describe how dollars were utilized including number served, activities and outcomes Funding was provided for loss of program revenue, increased demand for services, and core basic needs

Software ID:
Software Version:
EIN: 42-0861239
Name: United Way of East Central Iowa Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Abbe Center for Community Mental Health 520 11th Street NW Cedar Rapids, IA 52405	42-1045257	501(c)3	113,439				Flood Recovery, Donor Designation Support, & Program Funding Health
Aging Services Inc 800 First Street NW Cedar Rapids, IA 52405	23-7085316	501(c)3	446,430				Flood Recovery, Donor Designation Support, & Program Funding Health
Aid To Women 701 Center Point Rd NE Cedar Rapids, IA 52402	42-1203675	501(c)3	9,067				Donor Designation Support
Alzheimer's Association East Central Iowa Chapter 1570 42nd Street NE Cedar Rapids, IA 52402	42-1333384	501(c)3	90,965				Donor Designation Support & Program Funding Health
American Cancer Society CR 4080 First Avenue NE Cedar Rapids, IA 52402	42-0680353	501(c)3	140,044				Donor Designation Support & Program Funding Health
American Heart Association CR 1035 N Center Point Road Ste B Hiawatha, IA 52233	13-5613797	501(c)3	13,397				Donor Designation Support
American Red Cross 6300 Rockwell Drive NE Cedar Rapids, IA 52402	53-0196605	501(c)3	463,021				Flood Recovery, Donor Designation Support, & Program Funding Health & Income
Area Substance Abuse Council 3601 16th Avenue SW Cedar Rapids, IA 52404	42-1114396	501(c)3	494,004				Flood Recovery, Donor Designation Support, & Program Funding Health
Benton County Volunteer Program 1309 Fifth Avenue Belle Plaine, IA 52208	42-1023730	501(c)3	9,850				Donor Designation Support & Program Funding Health
Big Brothers Big Sisters 3150 E Ave NW Suite 103 Cedar Rapids, IA 52405	42-1170475	501(c)3	226,937				Flood Recovery, Donor Designation Support, & Program Funding Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Boy Scouts of America-Hawkeye Area660 32nd Avenue SW Cedar Rapids, IA 52404	42-0680304	501(c)3	193,877				Donor Designation Support & Program Funding Education
Boys & Girls ClubPO Box 8866 Cedar Rapids, IA 52408	42-1434056	501(c)3	265,232				Flood Recovery, Donor Designation Support, & Program Funding Education
Camp Courageous12007 19th St Monticello, IA 52310	23-7210932	501(c)3	7,167				Donor Designation Support
Catherine McAuley Center866 Fourth Avenue SE Cedar Rapids, IA 52401	42-1342872	501(c)3	164,124				Flood Recovery, Donor Designation Support, & Program Funding Income
Cedar Rapids Museum of Art410 Third Avenue SE Cedar Rapids, IA 52401	42-0680248	501(c)3	12,298				Flood Recovery & Donor Designation Support
Cedar Rapids Symphony 119 3rd Avenue SE Cedar Rapids, IA 52401	42-0772544	501(c)3	27,946				Flood Recovery & Donor Designation Support
Cedar Valley Habitat for Humanity725 N Center Point Road Hiawatha, IA 52233	42-1320296	501(c)3	7,140				Donor Designation Support
Cedar Valley Humane Society7411 Mt Vernon Road SE Cedar Rapids, IA 52403	42-0814023	501(c)3	5,692				Donor Designation Support
Coe College Foundation 1220 First Avenue NE Cedar Rapids, IA 52402	42-0686467	501(c)3	5,185				Donor Designation Support
Community Corrections Improvement Assoc951 29th Avenue SW Cedar Rapids, IA 52404	42-1382341	501(c)3	186,426				Flood Recovery, Donor Designation Support, & Program Funding Income & Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Community Health Charities of Iowa 1111 9th St Suite 275 Des Moines, IA 50314	42-1484988	501(c)3	5,552				Donor Designation Support
Community Health Free Clinic 947 14th Avenue SE Cedar Rapids, IA 52403	13-4228071	501(c)3	10,199				Donor Designation Support
Families Inc 101 West Main West Branch, IA 52358	42-1023208	501(c)3	51,697				Donor Designation Support & Program Funding Health
Foundation 21714 Johnson Avenue NW Cedar Rapids, IA 52405	42-1078444	501(c)3	624,359				Flood Recovery, Donor Designation Support, & Program Funding Health & Education
Four Oaks Family and Children Services 5400 Kirkwood Boulevard SW Cedar Rapids, IA 52404	42-0998726	501(c)3	11,525				Donor Designation Support
Girl Scouts of Eastern Iowa & Western Illinois 2600 Edgewood Road SW Ste 118 Cedar Rapids, IA 52404	42-1008848	501(c)3	73,472				Flood Recovery, Donor Designation Support, & Program Funding Education
Goodwill Industries of the Heartland 1410 South First Ave Iowa City, IA 52244	42-0923563	501(c)3	123,910				Donor Designation Support & Program Funding Income
Greater Cedar Rapids Community Foundation 200 First Street SW Cedar Rapids, IA 52404	42-6053860	501(c)3	10,000				Flood Recovery
Hands on DisasterPO Box 546 Carlisle, MA 01741	20-3414952	501(c)3	20,000				Flood Recovery
Hawkeye Area Community Action Program 1515 Hawkeye Drive Hiawatha, IA 52233	42-0898405	501(c)3	534,362				Flood Recovery, Donor Designation Support, & Program Funding Health, Income, & Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
HorizonsA Family Service Alliance 819 Fifth Street SE Cedar Rapids, IA 52403	42-1135083	501(c)3	776,325				Flood Recovery, Donor Designation Support, & Program Funding Health & Income
Indian Creek Nature Center 6665 Otis Road SE Cedar Rapids, IA 52403	23-7260197	501(c)3	11,787				Flood Recovery & Donor Designation Support
Iowa Legal Aid 210 Second Street SE 302 Cedar Rapids, IA 52401	42-1079227	501(c)3	247,234				Flood Recovery, Donor Designation Support, & Program Funding Income
Iowa State University Extension 3279 7th Avenue Marion, IA 52302	42-6021446	Government	21,287				Flood Recovery
Jane Boyd Community House 943 14th Avenue SE Cedar Rapids, IA 52403	42-0680359	501(c)3	491,431				Donor Designation Support & Program Funding Income & Education
Jefferson Band Parents Assoc 1243 20th Avenue SW Cedar Rapids, IA 52404	42-6081619	501(c)3	5,456				Donor Designation Support
Junior Achievement of East Central Iowa 315 Third Avenue SE 209 Cedar Rapids, IA 52401	42-0919209	501(c)3	13,781				Donor Designation Support
KIND Care Inc 501 Highland Street Williamsburg, IA 52361	42-1401217	501(c)3	8,144				Donor Designation Support & Program Funding Education
Kids First Law Center 621 4th Avenue SE Cedar Rapids, IA 52401	20-2199649	501(c)3	51,780				Donor Designation Support & Program Funding Education
Linn Area Long Term Recovery Coalition 220 6th Street NW Cedar Rapids, IA 52405	42-0861239	501(c)3	50,000				Flood Recovery

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Linn Mar School Foundation 3333 North 10th Street Marion, IA 52302	42-1267125	501(c)3	5,674				Donor Designation Support
MECCA 430 Southgate Avenue Iowa City, IA 52240	42-0946031	501(c)3	33,750				Program Funding Health
Mercy Medical Center Foundation 701 10th Street SE Cedar Rapids, IA 52403	51-0233180	501(c)3	12,043				Donor Designation Support
Neighborhood Transportation Service Inc 404 17th Street SE Cedar Rapids, IA 52403	26-1306253	501(c)3	102,535				Flood Recovery, Donor Designation Support, & Program Funding Income
Planned Parenthood of East Central Iowa 3425 First Avenue SE Cedar Rapids, IA 52402	42-1132892	501(c)3	5,788				Donor Designation Support
Rape Victim Advocacy Program 320 S Linn St Iowa City, IA 52240	42-6004813	501(c)3	25,132				Donor Designation Support & Program Funding Education
Rebuilding Palo Fund Inc 2293 Burt Road Palo, IA 52324	80-0216696	501(c)3	6,308				Donor Designation Support
Ronald McDonald House 730 Hawkins Drive Iowa City, IA 52240	42-1189783	501(c)3	5,765				Donor Designation Support
Rural Employment Alternatives 495 4th Avenue Conroy, IA 52220	42-1150011	501(c)3	31,755				Program Funding Income
Southeast Linn Community Center 106 South Washington Lisbon, IA 52253	43-1406317	501(c)3	24,434				Donor Designation Support & Program Funding Health

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
St Luke's Health Care Foundation 1026 A Avenue NE Cedar Rapids, IA 52402	42-1106819	501(c)3	114,921				Donor Designation Support & Program Funding Health
Tanager Place 2309 C Street SW Cedar Rapids, IA 52404	42-0688079	501(c)3	12,500				Flood Recovery
The ARC of East Central Iowa 680 2nd St SE Cedar Rapids, IA 52401	42-0805377	501(c)3	312,544				Flood Recovery, Donor Designation Support, & Program Funding Income
The Safe Place Foundation 527 Sixth Avenue SE Cedar Rapids, IA 52401	42-1348441	501(c)3	60,547				Donor Designation Support & Program Funding Income
The Salvation Army 1000 C Avenue NW Cedar Rapids, IA 52405	36-2167910	501(c)3	246,237				Flood Recovery, Donor Designation Support, & Program Funding Income & Education
Theatre Cedar Rapids 102 3rd Street SE Cedar Rapids, IA 52401	42-0890913	501(c)3	50,000				Flood Recovery
United Way of Johnson County 1150 Fifth Street Suite 290 Coralville, IA 52241	42-6062055	501(c)3	14,686				Donor Designation Support
United Way of Transylvania Cty PO Box 53 Brevard, NC 28712	23-7145022	501(c)3	6,000				Donor Designation Support
Visiting Nurse Association 600 Boyson Road NE Suite 2 Cedar Rapids, IA 52402	36-3052939	501(c)3	80,777				Donor Designation Support & Program Funding Health
Volunteer Services PO Box 307 Tipton, IA 52772	42-1341650	501(c)3	9,346				Program Funding Health

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
Waypoint Services for Women Children & Families 318 Fifth Street SE Cedar Rapids, IA 52401	42-0680307	501(c)3	655,268				Flood Recovery, Donor Designation Support, & Program Funding Income & Health
Williamsburg Community Child Care Center 100 Village View Circle Williamsburg, IA 52361	42-1401226	501(c)3	7,749				Donor Designation Support & Program Funding Education
Willis Dady Emergency Shelter 1247 Fourth Avenue SE Cedar Rapids, IA 52403	42-1311668	501(c)3	106,010				Flood Recovery, Donor Designation Support, & Program Funding Income
Witwer Center 1847 51st St NE Cedar Rapids, IA 52402	42-1153156	501(c)3	173,928				Flood Recovery, Donor Designation Support, & Program Funding Health
Xavier Foundation 6300 42nd Street NE Cedar Rapids, IA 52411	42-1479238	501(c)3	8,501				Donor Designation Support
YMCA of the Cedar Rapids Metropolitan Area 207 Seventh Avenue SE Cedar Rapids, IA 52401	42-0680306	501(c)3	366,181				Flood Recovery, Donor Designation Support, & Program Funding Education
Young Parents Network 205 12th Street SE Cedar Rapids, IA 52403	42-1355480	501(c)3	356,784				Flood Recovery, Donor Designation Support, & Program Funding Education

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

2008

Open to Public Inspection

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization United Way of East Central Iowa Inc

Employer identification number

42-0861239

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Cars, Securities, etc.

Table with 3 columns: Question, Yes, No. Rows include 30a, 31, 32a, 33 regarding contribution policies and reporting.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

2008

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue
Service

▶ 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.

Name of the organization
United Way of East Central Iowa Inc

Employer identification number
42-0861239

Identifier	Return Reference	Explanation
Form 990, Part III, line 2	New Program Services	In June 2008, one of the largest natural disasters in the history of our country affected our area Cedar Rapids alone has over \$5 billion in estimated damage/repair costs Community needs related to flood recovery have caused our organization to establish two additional fundraising programs this year United Way of East Central Iowa a Flood Recovery Fund collected over \$1.3 million Approximately \$1.1 million of that money was distributed to nonprofit agencies in our community, to help them recover/rebuild from the flood, make up for lost program revenue or meet increasing client demands caused by the flood Another \$300,000 is being distributed to Horizons A Family Service Agency and Iowa State University extension service to provide credit and financial counseling to flood impacted residents Working in conjunction with a local newspaper, United Way of East Central Iowa developed an adopt-a-family program entitled Holiday of Hope Forty families with extreme flood-related needs were identified Their stories were told in the newspaper We collected cash and gift card contributions and distributed 100% of what was collected to these families, per donor request During the program over \$150,000 was collected and distributed to those in need

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Flood Recovery In addition to our Flood Recovery Fund and Holiday of Hope program, United Way participates on several citywide recovery planning committees We represent the nonprofit sector on the Cedar Rapids Recovery and Reinvestment Coordinating Team UWECE is responsible for creating/organizing the Linn Area Long Term Recovery Coalition, focusing on unmet needs of flood affected individuals and families The coalition is made up of 50 organizations which are working together to find and distribute resources which will assist with recovery and rebuilding United Way staff directed many areas of the Coalition work for its first 9-12 months We also take an active role in the Community Communications Coalition, getting key flood-related messages properly and clearly distributed to all area residents Expenses \$ 1663866 including grants of \$ 1582484 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Community Impact Responsible for evaluating programs and recommending funding for the agencies Expenses \$ 345236 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	United Way 2-1-1 In its 24 county coverage area, 2-1-1 answered over 12,650 disaster-related calls in the last 12 months, and over 51,000 total calls Expenses \$ 292000 including grants of \$ 292000 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Other Initiatives Expenses \$ 137148 including grants of \$ 137148 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Labor Community Services United Way Labor Liaison educates local union workers about available area services and assists them in accessing these services We also work with the labor community to coordinate the local Stamp Out Hunger Food Drive which collected over 55,000 pounds of food this year Expenses \$ 90504 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Volunteer Management UWECE employs a full-time Community Volunteer Coordinator who oversees work done through the East Central Iowa Volunteer Center As part of flood recovery efforts, the Volunteer Center has coordinated the work of over 6,000 volunteers who have contributed over 136,000 hours We also manage the Corridor Volunteers website, connecting people online to volunteer opportunities at nonprofit organizations throughout the state Expenses \$ 81850 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Donor Designations Donor designation funds can be utilized by the agencies for program and/or administrative purposes Expenses \$ 1192559 including grants of \$ 1192559 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Director of Finance and Administration will direct the completion of the Form 990 and will be responsible for ensuring that the return is filed within the IRS prescribed 135 days following the close of the fiscal year, or if needed, an application for extension of time is filed with the IRS Members of the UWECE Board of Directors, with assistance from the Finance & Administration and Audit Committees, are stewards of the financial resources of the organization and are responsible for ensuring that these resources are used to further charitable purposes In addition, board and committee members should maintain proper financial oversight making sure that the funds of the organization are appropriately accounted for by receiving and reviewing up to date financial information including the annual Form 990 To facilitate adequate financial oversight, a draft version of the IRS Form 990 will be reviewed by the UWECE Audit Committee The preparers of the IRS Form 990 will provide a brief review and discussion of the Form 990 pointing out the significant areas and how the numbers relate to the audited financial statements After Audit Committee approval of the draft and subsequent changes, if necessary, a final copy of the IRS Form 990 will be reviewed by the UWECE Board of Directors prior to submission to the IRS The Form 990 will be distributed electronically to all Board members and will be presented to the Board of Directors annually at the board meeting which most closely corresponds with the completion of the IRS Form 990

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The Conflict of Interest policy is reviewed by the United Way Board of Directors every three years. United Way of America (United Way Worldwide) requires a Conflict of Interest policy as part of the annual certification process. In addition, the Iowa Principles and Practices for Charitable Nonprofit Excellence recommends this policy for good nonprofit practice. It is the policy of United Way of East Central Iowa that conflicts of interest should be disclosed and resolved at the earliest possible time. Every United Way Board member, Finance or Community Impact committee member and employee is required to sign a Conflict of Interest policy annually. These are collected and filed by the Executive Administrative Assistant. Each volunteer and employee must designate conflicts that relate to partner agency relationships, business affiliations or nepotism. Volunteers that have a conflict of interest regarding a United Way allocation or vendor relationship can not serve in a decision making capacity. These individuals must recuse themselves from any voting. These actions are documented in the minutes of the meetings. If any volunteer or employee has a concern about a potential or actual conflict of interest and how it has been resolved, the individual is requested to notify the President/CEO. The discussion and resolution of this issue will be addressed by the Executive Committee of the Board of Directors and a response will be documented.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		15a Executive Compensation Review. The compensation of the CEO is reviewed by the Board President, Past President, and Vice President. Information from the annual United Way of America compensation survey along with information from the Form 990 of other organizations is utilized to form the basis for compensation of the CEO. The compensation of the CEO is a recommendation from the Board President, Past President and Vice President and must be approved by the UWECI Board of Directors. 15b Key Employee Compensation Review. The compensation and benefit programs are reviewed by the Human Resource Committee of the Board of Directors. Salary schedules are reviewed annually with data from UWA and local firms.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The organization publishes its annual audited financial statements, most recently filed Form 990, and IRS determination letter on its external website at www.uweci.org . All governing documents, conflicts of interest, and financial statements can be made available to the public at their request.

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		There were no changes in the function of the Audit Committee.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

▶ **Attach to Form 990. To be completed by organizations that answer "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization
United Way of East Central Iowa Inc

Employer identification number

42-0861239

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Linn Area Long Term Recovery Coalition 220 6th St NW Cedar Rapids, IA 52405 42-0861239	Mobilize other orgs to address unmet needs of flood-impacted persons	IA	0	0	N/A

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproportionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions with Related Organizations

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		
1b		
1c		
1d		
1e		
1f		
1g		
1h		
1i		
1j		
1k		
1l		
1m		
1n		
1o		
1p		
1q		
1r		

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

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Additional Data

Software ID:
Software Version:
EIN: 42-0861239
Name: United Way of East Central Iowa Inc

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Tom Anderson , Director	1 00	X						0	0	0
Joan Aune , Director	1 00	X						0	0	0
John Bickel , Director	1 00	X						0	0	0
Barry Boyer , Director	1 00	X						0	0	0
Gilda Boyer , Director	1 00	X						0	0	0
Greg Brecht , Director	1 00	X						0	0	0
Lydia Brown , Director	1 00	X						0	0	0
Gary Chadick , Director	1 00	X						0	0	0
Jack Cosgrove , Director	1 00	X						0	0	0
Dwayne Daniels , Director	1 00	X						0	0	0
Ray Dochterman , Director	1 00	X						0	0	0
Jane Drapeaux , Director	1 00	X						0	0	0
Marc Gullickson , Director	1 00	X						0	0	0
Stuart Haker , Director	1 00	X						0	0	0
Salma Igram , Director	1 00	X						0	0	0
Dennis Jordan , Director	1 00	X						0	0	0
Karl Keeler , Director	1 00	X						0	0	0
Doug Kopp , Director	1 00	X						0	0	0
Dick Lorenz , Director	1 00	X						0	0	0
Beth Malicki , Director	1 00	X						0	0	0
Dick Meisterling , Director	1 00	X						0	0	0
Tom Moore , Director	1 00	X						0	0	0
Greg Neumeyer , Director	1 00	X						0	0	0
Matt O'Rourke , Director	1 00	X						0	0	0
Mary Ann Osborn , Director	1 00	X						0	0	0
Steve Ovel , Director	1 00	X						0	0	0
Rue Patel , Director	1 00	X						0	0	0
Dick Pilcher , Director	1 00	X						0	0	0
Terry Roemig , Director	1 00	X						0	0	0
Marcia Rogers , Director	1 00	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Susan Spivey , Director	1 00	X					0	0	0	
Dave Storey , Director	1 00	X					0	0	0	
Melodee Webb , Director	1 00	X					0	0	0	
Joie Welsh , Director	1 00	X					0	0	0	
Mike Wilkins , Director	1 00	X					0	0	0	
Dave Markward , Chair	1 00	X		X			0	0	0	
Larry Helling , Vice Chair	1 00	X		X			0	0	0	
Kevin Knutson , Treasurer	1 00	X		X			0	0	0	
Cindy Dietz , Secretary	1 00	X		X			0	0	0	
Lois Buntz , President/CEO	45 00	X		X			131,423	0	10,250	
Kristine Riley , Director of Finance	45 00			X			58,315	0	2,238	

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

United Way of East Central Iowa works to advance the common good by focusing on the building blocks we all need for a good life: education, income, and health. The goal of United Way is to create positive, long-lasting changes that prevent problems from happening in the first place. Our efforts educate residents about needs of the community and inspire people to be generous and caring. United Way invests donor dollars in the highest quality programs serving the low-income residents and educationally at-risk children in the area. Its Community Goals are: Children will be ready to enter school and have developmental support so they stay on track and become productive members of the community; working single parent headed households with low incomes obtain and sustain a subsistence wage that supports their families essential needs; uninsured and low-income families and older adults will have access to needed healthcare services.