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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)

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

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

C Name of organization
UNITED WAY OF THE VIRGINIA PENINSULA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
739 THIMBLE SHOALS BLVD SUITE 302

City or town, state or country, and ZIP + 4
NEWPORT NEWS, VA 23606

D Employer identification number
54-0535602

E Telephone number
(757) 873-9328

G Gross receipts $ 8,678,967

F Name and address of principal officer
Ty Joubert
739 THIMBLE SHOALS BLVD SUITE 302
Newport News, VA 23606

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 Website: ▶ www uwvp org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1941 | **M** State of legal domicile VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE PURPOSE OF THE UNITED WAY OF THE VIRGINIA PENINSULA IS TO IMPROVE THE QUALITY OF LIFE OF PEOPLE IN OUR COMMUNITY AT A COST THAT DOES NOT EXCEED THE RESOURCES PROVIDED BY DONORS

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	10
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
5	Total number of employees (Part V, line 2a)	5	16
6	Total number of volunteers (estimate if necessary)	6	23
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	6,952,859	6,529,962
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	230,744	-187,028
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	79,907	435,316
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,263,510	6,778,250
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,665,769	5,425,314
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)	885,143	789,320
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶323,375		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	677,046	694,468
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	8,227,958	6,909,102
19	Revenue less expenses Subtract line 18 from line 12	-964,448	-130,852
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)	11,719,355	12,135,528
21	Total liabilities (Part X, line 26)	5,333,861	5,034,138
22	Net assets or fund balances Subtract line 21 from line 20	6,385,494	7,101,390

Part II Signature Block

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

Sign Here

****** | 2010-08-30
Signature of officer | Date

Ty Joubert President
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Brian Windley	Date	Check if self-empolyed ▶ ☑	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ WITT MARES PLC 701 TOWN CENTER DRIVE SUITE 900 NEWPORT NEWS, VA 236064287		EIN ▶	Phone no ▶ (757) 873-1587

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

The purpose of the United Way of the Virginia Peninsula is to improve the quality of life of people in our community at a cost that does not exceed the resources provide by donors

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 1,040,380 including grants of $ 1,040,380) (Revenue $ 435,316)

Investing in Children & Youth-Providing support and involvement for our community's young people, these programs foster healthy development through recreational activities, child abuse prevention and advocacy programs, providing a viable alternative to gangs, drugs, teen pregnancy and family dysfunction Results You Can See for 2009 -Supported the only sliding-scale tuition rate, quality preschool program on the Penninsula which develops the whole child and foster school readiness -Supported health and fitness programs to more than 800 children and teens who may not have otherwise had the opportunity to participate -Supported the local foodbank's program which provided over 13 million pounds of food to children at risk of hunger in a safe and nurturing environment -Supported substance abuse treatment and prevention to more than 700 at- risk children and youth, supporting family members and improving lives

4b (Code) (Expenses $ 620,949 including grants of $ 620,949) (Revenue $)

Responding to Basic Needs-Disaster victims, homeless persons, separated families, and the economically disadvantaged, are just a few of the clients who benefit from social support programs The goal is to help these people attain economic and social stability Results you can see for 2009 -Supported area's 20-week winter homeless shelter which provided 46,824 bed nights Mobil Canteen and food pantry provided 111,516 meals for homeless individuals -Supported local disaster programs that served 2,500 men, women and children with emergency food, shelter and supplies following a disaster -Supported a full range of services which helps clients who have domestic and family violent histories build violence-free, self-sufficient lives

4c (Code) (Expenses $ 288,703 including grants of $ 288,703) (Revenue $)

Building Self-Sufficiency-These programs support and sustain families, particularly those experiencing stress or dysfunction Education, counseling, child and adult day care, treatment for sexual or physical abuse, emergency shelter, food and clothing are all amoung the services offered Results you can see for 2009 -Provided family literacy, workplace literacy and other specialized programs for 508 adults -Served more than 1600 individuals with disabilities annually in employment, community living, day support and early childhood programs -Made more than 3,700 trips to transport senior citizens to and from medical appointments -Provided legal services and conservatorship to families in need

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**
(Expenses $ 3,830,232 including grants of $ 3,475,282) (Revenue $)

4e **Total program service expenses** ▶ $ 5,780,264

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		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*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? **Yes** **No**			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional **12A** No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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 United States? *If "Yes," complete Schedule F, Part I*	14b		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 U S ? *If "Yes," complete Schedule F, Part II*	15		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 U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
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 line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		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*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35**		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	**1a**	0		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	**1c**			
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	**2a**	16		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	**2b**		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	**3a**			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	**3b**			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**			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? . .	**5a**			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	**5c**			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	**6a**			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**			No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**			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?	**7e**			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	**7f**			No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .	**7g**			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	**7h**			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	**8**			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	**9a**			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	**9b**			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . .	1a 10		
b	Enter the number of voting members that are independent . .	1b 10		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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? . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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

☐ Own website ☑ Another's website ☑ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

Tyrone Joubert
739 THIMBLE SHOALS BLVD STE 400
Newport News, VA 23606
(757) 873-9328

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

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

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
John Garrett Director	50	X						0	0	0
Bobby HATTEN Director	50	X						0	0	0
Terry Morris Director	50	X						0	0	0
Kevin Murphy Director	50	X						0	0	0
Cathy Williams Director	50	X						0	0	0
Elizabeth McCormick Director	50	X						0	0	0
Dr Ashby Kilgore Director	50	X						0	0	0
Pat Robertson Director	50	X						0	0	0
William Downey Ex-Officio	50	X						0	0	0
Jimmy Haggard Treasurer	50			X				0	0	0
TYRONE JOUBERT President/Secretary	40 00			X				189,252	0	24,584
WILLIAM R ERMATINGER Chairman of the Board	50			X				0	0	0

1b Total . . . . . ▶	189,252	0	24,584

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a 6,529,962				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f				
	g	Noncash contributions included in lines 1a-1f $				
	h	**Total.** Add lines 1a-1f . . . . . ▶	6,529,962			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	**Total.** Add lines 2a–2f . . . . . ▶				
	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶	145,433			145,433
	4	Income from investment of tax-exempt bond proceeds . . ▶				
	5	Royalties . . . . . ▶				
		(i) Real / (ii) Personal				
	6a	Gross Rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss) . . . . . ▶				
		(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory: 1,568,256				
	b	Less cost or other basis and sales expenses: 1,892,410 / 8,307				
	c	Gain or (loss): -324,154 / -8,307				
	d	Net gain or (loss) . . . . . ▶	-332,461			-332,461
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . a				
	b	Less direct expenses . . . b				
	c	Net income or (loss) from fundraising events . . ▶				
	9a	Gross income from gaming activities See Part IV, line 19 . . . a				
	b	Less direct expenses . . . b				
	c	Net income or (loss) from gaming activities . . . ▶				
	10a	Gross sales of inventory, less returns and allowances . a				
	b	Less cost of goods sold . . b				
	c	Net income or (loss) from sales of inventory . . ▶				
Other Revenue		Miscellaneous Revenue / Business Code				
	11a	Service Fees 900,099	327,438	327,438		
	b	Miscellaneous Income 900,099	107,878	107,878		
	c					
	d	All other revenue				
	e	**Total.** Add lines 11a–11d . . . . . ▶	435,316			
	12	**Total revenue.** See Instructions . . . ▶	6,778,250	435,316	0	-187,028

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	5,425,314	5,425,314		
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	189,252	28,235	104,841	56,176
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	451,318	67,334	250,019	133,965
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	104,178	15,543	57,712	30,923
10 Payroll taxes	44,572	6,650	24,692	13,230
11 Fees for services (non-employees)				
a Management				
b Legal	8,275		8,275	
c Accounting	31,700		31,700	
d Lobbying				
e Professional fundraising *See Part IV, line 17*				
f Investment management fees				
g Other				
12 Advertising and promotion	11,872		4,420	7,452
13 Office expenses	29,859	867	19,966	9,026
14 Information technology				
15 Royalties				
16 Occupancy	79,216	11,816	43,885	23,515
17 Travel	9,509	427	9,039	43
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates	56,926	8,450	31,378	17,098
22 Depreciation, depletion, and amortization	12,805	1,911	7,093	3,801
23 Insurance	7,103	1,060	3,935	2,108
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 Uncollectible - Write-o	169,701	169,701		
b Combined Federal Campai	158,680		158,680	
c Finance Charges	31,522	31,522		
d Unemployment	23,627	3,525	13,089	7,013
e Severance	21,993	3,281	12,184	6,528
f All other expenses	41,680	4,628	24,555	12,497
25 **Total functional expenses.** Add lines 1 through 24f	6,909,102	5,780,264	805,463	323,375
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		2,127,780	1	2,386,527
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		5,560,597	3	5,211,209
	4	Accounts receivable, net		184,318	4	190,971
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		19,636	9	9,879
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 196,074			
	b	Less accumulated depreciation	10b 160,581	24,649	10c	35,493
	11	Investments—publicly traded securities		3,802,375	11	
	12	Investments—other securities See Part IV, line 11			12	4,301,449
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		11,719,355	16	12,135,528
Liabilities	17	Accounts payable and accrued expenses		2,008,869	17	2,371,814
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		3,324,992	25	2,662,324
	26	**Total liabilities.** Add lines 17 through 25		5,333,861	26	5,034,138
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		3,680,872	27	4,238,652
	28	Temporarily restricted net assets		2,704,622	28	2,862,738
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	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		6,385,494	33	7,101,390
	34	Total liabilities and net assets/fund balances		11,719,355	34	12,135,528

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED WAY OF THE VIRGINIA PENINSULA

Employer identification number
54-0535602

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **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).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

_____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box 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?

	Yes	No
(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? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
Total									

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	7,570,884	7,582,179	7,478,694	6,952,859	6,529,962	36,114,578
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	7,570,884	7,582,179	7,478,694	6,952,859	6,529,962	36,114,578
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						759,935
6 **Public Support.** Subtract line 5 from line 4						35,354,643

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	7,570,884	260,718	7,478,694	6,952,859	6,529,962	36,114,578
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	179,275	260,718	307,568	230,744	145,433	1,123,738
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	288,016	285,804	316,518	376,120	435,316	1,701,774
11 **Total support** (Add lines 7 through 10)						38,940,090

12 Gross receipts from related activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	**14**	90 790 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	**15**	91 390 %

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☑

b **33 1/3% support test—2008.** 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—2009.** 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—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

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

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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

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

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15
16	Public support percentage from 2008 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b **33 1/3% support tests—2008.** 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.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 54-0535602
Name: UNITED WAY OF THE VIRGINIA PENINSULA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 3,830,232 including grants of $ 3,475,282) (Revenue $)

Other Allocations-These programs address disabling conditions or life-threatening illnesses Their common goal is to improve the quality of life for those with health issues Results you can see for 2009 -Sponsored training in CPR and First Aid and life skills training to nearly 15,000 individuals -Sponsored program offering health care services which allow a child with a life-limiting illness to stay at home whenever possible Other Designations-Gross Agency Designations at the request of donors Other COntracts and Grants- COntracts for Volunteer Center, INformation Referral, Dental Clinic, Housing and Other

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Uncollectible - Write-o	169,701	169,701		
Combined Federal Campai	158,680		158,680	
Finance Charges	31,522	31,522		
Unemployment	23,627	3,525	13,089	7,013
Severance	21,993	3,281	12,184	6,528

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED WAY OF THE VIRGINIA PENINSULA

Employer identification number
54-0535602

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.

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

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

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

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)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

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

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

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

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

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 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 the arrangement in Part XIV and complete the following table

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

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

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

Part V Endowment Funds. Complete if 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	1,451,604	1,613,263			
b Contributions	-77,897	-161,659			
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,373,707	1,451,604			

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

- a Board designated or quasi-endowment ▶ 100 000 % %
- b Permanent endowment ▶ %
- c Term endowment ▶ %

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

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
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) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		119,632	87,871	31,761
e Other		76,442	72,710	3,732
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				35,493

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other 4,301,449	4,301,449	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	4,301,449	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Allocations and Designations Payable	2,642,054
Capital Lease Obligations	20,270
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	2,662,324

2. Fin 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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	6,778,250
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,909,102
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-130,852
4	Net unrealized gains (losses) on investments	4	846,748
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	846,748
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	715,896

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	4,118,529
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	846,748		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	846,748
3	Subtract line **2e** from line **1**			3	3,271,781
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	3,506,469		
c	Add lines **4a** and **4b**			4c	3,506,469
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	6,778,250

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

1	Total expenses and losses per audited financial statements			1	3,402,633
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	3,402,633
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	3,506,469		
c	Add lines **4a** and **4b**			4c	3,506,469
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	6,909,102

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Board Reserve in event of major financial or organizational crisis
		Part XII line 4b, and Part XIII line 4b $31,522 finance charges netted with interest income for book purposes $169,701 bad debt expense netted with revenues for book purposes $3,305,246 DO nor Designated Grants

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED WAY OF THE VIRGINIA PENINSULA

Employer identification number
54-0535602

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(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
See Additional Data Table							

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" to 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.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Monitoring Policies for Allocations & Grants-These organizations receive discretionary funding and thus undergo intensive pre-screening and follow up before being awarded funding including -An application process that includes explanation of proposed use and results of funding -FInancial review of the organization to gain a level of assurance that the organization follows sound fiscal policies -Verification of IRS 501(c)(3) -Annual progress reports showing how funds are being utilized and detailing the outcomes using the logic-model Monitoring Policies for Designated funds-These organizations have no formal relationship with United Way other than the fact that donors have requested us to act as an agent on their behalf and send funds to these organizations We verify the organization's contact information and that it is a 501(c)(3) in good standing with the IRS

Additional Data Return to Form

Software ID:
Software Version:
EIN: 54-0535602
Name: UNITED WAY OF THE VIRGINIA PENINSULA

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
Boys & Girls Club VA Peninsula11825 Rock Landing Drive Newport News, VA 23606	54-0538202	501(c)(3)	357,045				Investing in Children & Youth
Foodbank Of The VA Peninsula9912 Hosier Street Newport News, VA 23601	54-1422298	501(c)(3)	91,642				Responding to Basic Needs
American Red Cross-Hampton Rds4915 West Mercury Boulevard Newport News, VA 23605	54-0515737	501(c)(3)	138,871				Responding to Basic Needs
Salvation Army - Pen CommandPO Box 7529 Hampton, VA 23666	58-0660607	501(c)(3)	154,068				Responding to Basic Needs
TransitionsPO Box 561 Hampton, VA 23669	51-0239447	501(c)(3)	149,265				Building Self Sufficiency
Center For Child & Family Svs2021 Cunningham Drive Hampton, VA 23666	54-0505893	501(c)(3)	160,404				Improving Health
Downtown Hampton ChildThe Bagley Center 60 Battle Road Hampton, VA 23666	54-0890222	501(c)(3)	111,233				Investing in Children & Youth
Arc Of The Va Peninsula 2520 58th Street Hampton, VA 23661	54-0802199	501(c)(3)	94,754				Improving Health
Boy Scouts Of Am-Col VA 11721 Jefferson Avenue Newport News, VA 23606	54-0505994	501(c)(3)	36,620				Investing in Children & Youth
Girls Inc Of The Greater Pen 1300 Thomas Street Suite C Hampton, VA 23669	54-0679053	501(c)(3)	94,930				Investing in Children & Youth

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
Peninsula Metro YMCA101 Long Green Boulevard Yorktown, VA 23693	54-0524905	501(c)(3)	64,543				Improving Health
Catholic Charities Of Eastern VA5361 Virginia Beach Boulevard Suite A Virginia Beach, VA 23462	54-0505879	501(c)(3)	27,740				Responding to Basic Needs
LINK Of Hampton Roads 10413 Warwick Boulevard Newport News, VA 23601	54-1556503	501(c)(3)	78,047				Responding to Basic Needs
Planned Parenthood Of Se VA400 Yale Drive Hampton, VA 23606	54-0929058	501(c)(3)	52,032				Improving Health
Peninsula Reads393 Denbigh Boulevard Suite A Newport News, VA 23608	54-0843098	501(c)(3)	64,764				Responding to Basic Needs
Riverside Health Systems Fountain Plaza One 701 Town Center Drive Suite 1000 Newport News, VA 23606	54-1994013	501(c)(3)	90,000				Responding to Basic Needs
Peninsula Agency On Aging 739 Thimble Shoals Boulevard Suite 1006 Newport News, VA 23606	54-0151069	501(c)(3)	44,402				Responding to Basic Needs
Alternatives Inc2021-B Cunningham Drive Suite 5 Hampton, VA 23666	54-0948440	501(c)(3)	59,508				Investing in Children & Youth
American Red Cross-YorkPoq6912 George Washington Memorial Highway Yorktown, VA 23692	54-0549100	501(c)(3)	13,962				Responding to Basic Needs
Girl Scouts Of The Colonial 912 Cedar Road Chesapeake, VA 23322	54-1158412	501(c)(3)	36,254				Investing in Children & Youth

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
Child Development ResourcesPO Box 280 Norge,VA 23127	54-0791991	501(c)(3)	36,434				Investing in Children & Youth
Peninsula YWCAPO Box 736 Newport News,VA 23607	54-0545602	501(c)(3)	67,500				Improving Health
The Volunteer Center2210 Executive Drive Suite B Hampton,VA 23666	54-1810258	501(c)(3)	45,000				Building Capacity
Edmarc Hospice For Children 516 London Street Portsmouth,VA 23704	54-1092904	501(c)(3)	10,986				Improving Health
Bacon Street247 McLaws Circle Williamsburg,VA 23185	54-0891035	501(c)(3)	23,803				Improving Health
Gloucester HousingPO Box 772 Hayes,VA 23072	54-1635676	501(c)(3)	24,125				Building Self Sufficiency
USO Of Hampton RoadsPO Box 7250 Hampton,VA 23666	54-1305517	501(c)(3)	13,641				Responding to Basic Needs
Retired Senior Vol Program 12388 Warwick Boulevard Suite 201 Newport News,VA 23606	31-1725529	501(c)(3)	25,090				Building Self Sufficiency
Boys & Girls Club VA Peninsula11825 Rock Landing Drive Cheaspeake Building Suite B Newport News,VA 23606	54-0538202	501(c)(3)	63,766				Designation
Community Health Charities Of Virginia813 Diligence Drive Suite 121-A Newport News,VA 23606	54-1876027	501(c)(3)	452,687				Designation

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

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Foodbank Of The VA Peninsula9912 Hosier Street Newport News, VA 23601	54-1422298	501(c)(3)	95,822				Designation
American Red Cross-Hampton Rds4915 West Mercury Boulevard Newport News, VA 23605	54-0515737	501(c)(3)	65,277				Designation
Salvation Army - Pen CommandPO Box 7529 Hampton, VA 23666	58-0660607	501(c)(3)	38,643				Designation
TransitionsPO Box 561 Hampton, VA 23669	51-0239447	501(c)(3)	35,563				Designation
Center For Child & Family Svs2021 Cunningham Drive Suite 400 Hampton, VA 23666	54-0505893	501(c)(3)	9,338				Designation
Downtown Hampton ChildThe Bagley Center 60 Battle Road Hampton, VA 23666	54-0890222	501(c)(3)	22,242				Designation
Arc Of The Va Peninsula 2520 58th Street Hampton, VA 23661	54-0802199	501(c)(3)	35,993				Designation
Boy Scouts Of Am-Col VA 11721 Jefferson Avenue Newport News, VA 23606	54-0505994	501(c)(3)	53,336				Designation
Peninsula Metro YMCA101 Long Green Boulevard Yorktown, VA 23693	54-0524905	501(c)(3)	21,601				Designation
Catholic Charities Of Eastern VA5361 Virginia Beach Boulevard Suite A Virginia Beach, VA 23462	54-0505879	501(c)(3)	62,489				Designation

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
Link Of Hampton Roads 10413 Warwick Boulevard Newport News, VA 23601	54-1556503	501(c)(3)	16,874				Designation
Planned Parenthood Of Se VA400 Yale Drive Hampton, VA 23606	54-0929058	501(c)(3)	16,275				Designation
Peninsula Reads393 Denbigh Boulevard Suite A Newport News, VA 23608	54-0843098	501(c)(3)	15,872				Designation
Peninsula Agency On Aging 739 Thimble Shoals Boulevard Suite 1006 Newport News, VA 23606	54-0151069	501(c)(3)	27,761				Designation
Alternatives Inc2021-B Cunningham Drive Suite 5 Hampton, VA 23666	54-0948440	501(c)(3)	15,487				Designation
American Red Cross- YorkPoq6912 George Washington Memorial Highway Yorktown, VA 23692	54-0549100	501(c)(3)	23,118				Designation
Girl Scouts Of The Colonial 912 Cedar Road Chesapeake, VA 23322	54-1158412	501(c)(3)	12,267				Designation
Child Development ResourcesPO Box 280 Norge, VA 23127	54-0791991	501(c)(3)	14,929				Designation
Edmarc Hospice For Children 516 London Street Portsmouth, VA 23704	54-1092904	501(c)(3)	30,237				Designation
Bacon Street247 McLaws Circle Williamsburg, VA 23185	54-0891035	501(c)(3)	9,310				Designation

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
Gloucester HousingPO Box 772 Hayes,VA 23072	54-1635676	501(c)(3)	8,293				Designation
USO Of Hampton RoadsPO Box 7250 Hampton,VA 23666	54-1305517	501(c)(3)	18,599				Designation
Riverside Health Foundation Fountain Plaza One 701 Town Center Drive Suite 1000 Newport News,VA 23606	54-1994013	501(c)(3)	39,110				Designation
Virginia Living Museum524 J Clyde Morris Boulevard Newport News,VA 23601	54-6055922	501(c)(3)	39,375				Designation
Mariners Museum100 Museum Drive Newport News,VA 23606	54-0541801	501(c)(3)	18,773				Designation
Preschool Partners Of The 321 Main Street Suite A Newport News,VA 23601	20-1421876	501(c)(3)	13,012				Designation
Gloucester-Mathews Humane PO Box 385 Gloucester,VA 23061	51-0206328	501(c)(3)	12,218				Designation
CNU Ferguson Center For The1 University Place 3rd Floor Admin Building Newport News,VA 23606	54-1156248	501(c)(3)	10,000				Designation
Univ Of North Carolina - ChapelPO Box 2446 Chapel Hill,NC 27515	56-6058412	501(c)(3)	5,000				Designation
Gloucester Vol Fire & Rescue PO Box 1417 Gloucester,VA 23061	23-7028667	501(c)(3)	7,982				Designation

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
Hospice Support Care Wmsbg 4445 Powhatan Parkway Williamsburg,VA 23188	52-1289657	501(c)(3)	15,156				Designation
Abingdon Volunteer Fire CoIn PO Box 9 bena,VA 23018	23-7330651	501(c)(3)	5,270				Designation
Six House Incorporated2003 Kecoughtan Road Hampton,VA 23661	22-3861588	501(c)(3)	6,879				Designation
Orphan Helpers Inc813 Forrest Drive Suite A Newport News,VA 23606	54-1995429	501(c)(3)	6,740				Designation
Peninsula Community Foundation11742 Jefferson Avenue Suite 350 Newport News,VA 23606	54-2057957	501(c)(3)	15,337				Designation
Hampton Roads Academy739 Academy Lane Newport News,VA 23602	54-0659912	501(c)(3)	11,389				Designation
Gloucester-Matthews Free Clinc2276 George Washington Memorial HWY HWY hayes,VA 23072	54-1875619	501(c)(3)	5,178				Designation
United Way Of Gtr Williamsburg312 Waller Mill Road Suite 100 Williamsburg,VA 23187	54-0844073	501(c)(3)	7,903				Designation
Carenet Resource Pregnancy 321 Main Street Suite 1 Newport News,VA 23601	54-1372036	501(c)(3)	6,464				Designation
Youth FocusGathering of Men 653 Harpersville Road Newport News,VA 23601	54-1649146	501(c)(3)	12,126				Designation

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 PO Box 75153 Baltimore, MD 21275	13-6167225	501(c)(3)	168,388				CFC Designation
Community Health Charities Of Virginia813 Diligence Drive Suite 121-A Newport News, VA 23606	54-1876027	501(c)(3)	91,668				CFC Designation
Health & Medical Research Charities of AmericaPO Box 45763 san francisco, CA 94145	94-3217739	501(c)(3)	81,065				CFC Designation
Military Veterans & Patriotic Service Organizations of AmericaPO Box 45766 san francisco, CA 94145	94-3193418	501(c)(3)	75,851				CFC Designation
Global ImpactPO Box 409616 atlanta, GA 30384	52-1273585	501(c)(3)	56,480				CFC Designation
Christian Service Charities PO Box 79704 Baltimore, MD 21279	94-3193374	501(c)(3)	66,567				CFC Designation
CancerCURE of AmericaPO Box 45501 san francisco, CA 94145	81-0648432	501(c)(3)	74,831				CFC Designation
United Way Of South Hampton Roads2515 Walmer Avenue norfolk, VA 23541	54-0506322	501(c)(3)	51,508				CFC Designation
Animal Charities of America PO Box 45756 san francisco, CA 94145	94-3193389	501(c)(3)	62,411				CFC Designation
American Red CrossPO Box 73857 chicago, IL 60673	53-0196605	501(c)(3)	43,179				CFC Designation

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
Children's Charities of AmericaPO Box 45757 san francisco, CA 94145	94-3148588	501(c)(3)	56,991				CFC Designation
Christian Charities USAPO Box 45758 san francisco, CA 94145	94-3255961	501(c)(3)	38,432				CFC Designation
America's CharitiesPO Box 79570 Baltimore, MD 21279	54-1517707	501(c)(3)	32,318				CFC Designation
Medical Research Charities PO Box 79703 Baltimore, MD 21279	94-3148591	501(c)(3)	34,589				CFC Designation
United Way Of Greater Williamsburg312 Waller Mill Road Suite 100 Williamsburg, VA 23187	54-0844073	501(c)(3)	31,044				CFC Designation
Earth ShareCampaign CFC Region PO Box 4011 Washington, DC 20042	52-1601960	501(c)(3)	28,339				CFC Designation
Children First - America's CharitiesPO Box 79570 Baltimore, MD 21279	30-0186795	501(c)(3)	29,599				CFC Designation
Conservation & Preservation Charities of AmericaPO Box 45759 san francisco, CA 94145	94-3217738	501(c)(3)	28,409				CFC Designation
Children's Medical Charities of AmericaPO Box 45310 san francisco, CA 94145	27-0093393	501(c)(3)	24,673				CFC Designation
Local Independant Charities PO Box 45754 san francisco, CA 94145	94-3042430	501(c)(3)	19,238				CFC Designation

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
Women Children and Family Service Charities of America PO Box 45767 san francisco, CA 94145	94-3193386	501(c)(3)	14,432				CFC Designation
United Negro College Fund (UNCF)8260 Willow Oaks Corporate Drive fairfax, VA 22031	13-1624241	501(c)(3)	13,643				CFC Designation
Wounded Warrior Project 7020 AC Skinner Parkway Suite 100 jacksonville, FL 32256	20-2370934	501(c)(3)	17,734				CFC Designation
Health First - America's CharitiesPO Box 79570 Baltimore, MD 21279	30-0186796	501(c)(3)	16,487				CFC Designation
Human Care Charities of AmericaPO Box 45765 san francisco, CA 94145	94-3067804	501(c)(3)	15,297				CFC Designation
USO Inc2111 Wilson Blvd Suite 1200 Arlington, VA 22201	13-1610451	501(c)(3)	14,633				CFC Designation
Peninsula Habitat For Humanity809 Main Street Suite 105 Newport News, VA 23605	52-1431619	501(c)(3)	10,030				CFC Designation
Do Unto OthersPO Box 45760 san francisco, CA 94145	94-3148590	501(c)(3)	10,705				CFC Designation
Aid For Africa6909 Ridgewood Avenue chevy chase, MD 20815	61-7032950	501(c)(3)	6,571				CFC Designation
Educate America The Education School Support and Scholarship Funds Coalit PO Box 45761 San Francisco, CA 94145	94-3193387	501(c)(3)	6,972				CFC Designation

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
Abingdon Volunteer Fire Company IncPo Box 9 bena, VA 23018	23-7330651	501(c)(3)	6,450				CFC Designation
Make-A-Wish Foundation Of Eastern VA240 Business Park Drive Virginia Beach, VA 23462	54-1365286	501(c)(3)	7,051				CFC Designation
Human Service Charities of AmericaPO Box 79770 Baltimore, MD 21279	94-3240353	501(c)(3)	7,095				CFC Designation
Gloucester Mathews Humane Society IncPO Box 385 Gloucester, VA 23061	51-0206328	501(c)(3)	5,319				CFC Designation
Human & Civil Rights Organizations of America10 Chestnut Street Salem salem, MA 01970	94-3193388	501(c)(3)	6,075				CFC Designation
Heritage Humane Society430 Waller Mill Road Williamsburg, VA 23185	54-1641580	501(c)(3)	7,258				CFC Designation
Ft Eustis Army Community Service601 Hines Circle ft eustis, VA 23604		501(c)(3)	6,310				CFC Designation
Archdiocese for the Military Services USA1025 Michigan Avenue NE Washington, DC 20017	13-1624090	501(c)(3)	5,024				CFC Designation
Masonic Home Of Virginia 4101 Nine Mile Road richmond, VA 23223	54-0541802	501(c)(3)	5,226				CFC Designation
Hispanic United Fund1100 Larkspur Landing Circle Suite 240 larkspur, VA 94939	68-0455509	501(c)(3)	5,224				CFC Designation

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED WAY OF THE VIRGINIA PENINSULA

Employer identification number
54-0535602

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☐ Compensation committee ☑ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
TYRONE JOUBERT	(i)	167,219	10,033	12,000	0	24,584	213,836	218,892
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
	Part I, Line 4a	Tyrone Joubert-Organization contributes $0, it is a 403b Plan Plan became qualified in 2010
	Part I, Line 7	Bonus of $13,000 paid to Tyrone Joubert

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED WAY OF THE VIRGINIA PENINSULA

Employer identification number
54-0535602

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		The organization is a membership organization Every donor is deemed a member
Form 990, Part VI, Section A, line 7a		Every deemed member is eligible to vote for board members and elect officers at the annual meeting
Form 990, Part VI, Section B, line 11		A copy of the tax return was e-mailed to each board member for review before it was filed with the IRS
Form 990, Part VI, Section B, line 12c		Conflicts are monitored and disclosed annually When a conflict arises, the board member is informed that they must excuse themselves from any decisions that directly impact the related entity
Form 990, Part VI, Section B, line 15a		The Board of Directors has an annual executive session without the CEO or staff where compensation for the CEO is discussed and determined
Form 990, Part VI, Section C, line 19		Information is available at our office and released upon request
FOrm 990, Part XI, line 2c	Audit Committee	An audit committee meets with the auditing firm at the beginning of the audit to provide input to the auditors on any specific areas that they wish to focus on At the end of the process the committee meets with the audit firm once again to discuss how the process went and to go over the audited financial The committee then reports the results to the Board of Directors
Part V, Q 1c	Line Explanation	Question 1c does not apply to the organization because the organization did not have backup withholding for reportable payments to vendors and reportable gaming winnings

Identifier	Return Reference	Explanation
Form 990, Part V, Q 7g and 7h	Line Explanation	Questions 7g and 7h do not apply to the organization because the organization did not have contributions of qualified intellectual property or contributions of cars, boats, airplanes or other vehicles during the year