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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)

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

Form 990 (2009)

Inspection For the 2009 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization Employer identification number use IRS UNITED WAY OF NORTH CAROLINA Address change label or 56-0564547 Doing Business As Name change print o type Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 1235 TWO HANOVER SQUARE 919-834-5200 Specific Termination City or town, state or country, and ZIP + 4 1,182,958 G Gross receipts \$ Instruc-Amended return tions RALEIGH NC 27601 F Name and address of principal officer H(a) Is this a group return for Application pending X No affihates? H(b) Are all affiliates included? If "No," attach a list (see instructions) X 501(c) ◀ (insert no) Tax-exempt status 4947(a)(1) or 527 WWW.UNITEDWAYNC.ORG Website 🕨 H(c) Group exemption number ▶ Type of organization | X | Corporation Trust Association Other > Year of formation M State of legal domicile Part 1 Summary 1 Briefly describe the organization's mission or most significant activities PROVIDE TECHNICAL ASSISTANCE AND CONSULTATION TO LOCAL UNITED WAY AGENCIES SCANNED JUN 2 5 2010
Revenue Activities & Governance Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 26 3 Number of independent voting members of the governing body (Part VI, line 1b) 26 4 12 Total number of employees (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7ь Pnor Year **Current Year** Contributions and grants (Part VIII, line 1h) 601,558 651,284 732,778 Program service revenue (Part VIII, line 2g) 528,474 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 6,972 3,200 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,341,308 1,182,958 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 785,413 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 698,477 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 586,998 329,174 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), PRESCEIVED 1,027,651 1,372,411 19 Revenue less expenses Subtract line 18 from line 12 -31,103 155,307 Assets or Balances SS Beginning of Current Year End of Year MAY 17 2010 925,674 20 Total assets (Part X, line 16) 695,371 က် 21 Total liabilities (Part X, line 26) 57,770 132,789 22 Net assets or fund balances Subtract line 21 from line 20 637,601 792,885 OGDEN, 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 lief, 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 officer RISON President, United War Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) Paid signature 05/11/10 P00181775 employed > Preparer's LUCAS AND COMPANY, JAMES LLP 56-1137607 EIN > Firm's name (or Use Only 4909 WESTERN BLVD STE 200 if self-employed Phone address, and ZIP + 4 RALEIGH, NC 27606-1749 919-851-4696 May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

,					
Part III	Statemer	nt of Program	Service	Accomplis	hments

1 Briefly describe the organization's mission PROVIDE TECHNICAL ASSISTANCE AND CONSULTATION TO LOCAL UNITED WAY	AGENCIES
 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program 	Yes X No
services? If "Yes," describe these changes on Schedule O 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	Yes X No
4a (Code) (Expenses \$ 260,198 including grants of \$) (Revenue \$ MEMBER SERVICES-ENABLES UWNC TO PROVIDE TRAINING IN AN EFFECTIVE, TIMELY MANNER. ALSO PROVIDES MTG OPPORTUNITIES FOR UPDATES & EXCHANGE OF IDEAS. INCREASE & IMPROVE CAMPAIGNS)
4b (Code) (Expenses \$ 518,684 including grants of \$) (Revenue \$ STATE EMPLOYEES COMBINED CAMPAIGN- PROVIDES EVERY STATE EMPLOYEE WITH THE OPPORTUNITY TO CONTRIBUTE)
4c (Code) (Expenses \$ 141,434 including grants of \$) (Revenue \$ GOVERNMENT RELATIONS-BRINGS POLICY INFORMATION TO LOCAL UNITED WAYS AND ORGANIZES TO BRING COLLECTIVE ACTION)
4d Other program services (Describe in Schedule O) (Expenses \$ 62,596 including grants of \$) (Revenue \$)
4e Total program service expenses ▶ 982,912	Form 990 (2009)

Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"				Yes	No
	complete Schedule A			1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?			2		x
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to					
	candidates for public office? If "Yes," complete Schedule C, Part I			3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			<u> </u>		
	Schedule C, Part II			4	х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			<u> </u>		_
	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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			۲		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			<u> </u>		
	complete Schedule D, Part III			8		х
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,"					ļ
	complete Schedule D, Part IV			9		х
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		x
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	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 169 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 related 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	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	T	es No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	X	1	2	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?			14a		х
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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any					
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II			15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance					
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III			16		х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u> </u>		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			18		х
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		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			20		X
					990	(2000)

Part IV Checklist of Required Schedules (continued)

_	19? Note All Form 990 filers are required to complete Schedule O	38		0 (2222
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20	x	
	Part VI	37	1	Х
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	ł		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			T
- -	organization? If "Yes," complete Schedule R, Part V, line 2	36	1	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		1	
50	Schedule R, Part V, line 2	35		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		1	
J-4	III, IV, and V, line 1	34	1	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<u> </u>
J.	Schedule N, Part II	32		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		 	T
٠.	Part I	31		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
55	conservation contributions? If "Yes," complete Schedule M	30	1	x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	X
	Part IV	28c	1	х
С	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 direct or indirect owner? If "Yes," complete Schedule L,			
	Schedule L, Part IV An onlity of which a current or former officer, director, trustee, or key employee of the greanization (or a	28b	 	├^
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	305	}	х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		├	X
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1		
	If "Yes," complete Schedule L, Part III	27	ļ	X
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	[,.
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	İ		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ļ		1
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction			1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
	to defease any tax-exempt bonds?	24c		<u> </u>
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u> x</u>
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
24a				<u> </u>
	employees? If "Yes," complete Schedule J	23		x
-7	organization's current and former officers, directors, trustees, key employees, and highest compensated			
23	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			х
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	24		v
	The state of the s		Yes	No

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	4			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	·		1	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able				
2-	gaming (gambling) winnings to prize winners?	1 1		1c	ļ	X
2a			10			
_	Statements, filed for the calendar year ending with or within the year covered by this return	2a	12			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by					
Ju	this return?	y				v
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3a		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ort.		3b		 -
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	-				
	account)?	iar		4a		х
b	If "Yes," enter the name of the foreign country			70		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	nk				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		•	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	2		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regardii			12		
	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		x
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				
	gifts were not tax deductible?			6b		L
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	at				
	and services provided to the payor?			7a	<u> </u>	L
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ŀ		
	required to file Form 8282?	1 1		7c	ļ	ļ
d	, , , , , , , , , , , , , , , , , , ,	7d				İ
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a perso benefit contract?	onal		}_		
•	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	,		7e	 	 -
,	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7f		
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			<u>7g</u>		
••	required?			76	Ī	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			7h		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					<u> </u>
	organization, have excess business holdings at any time during the year?			8	Ì	
9	Sponsoring organizations maintaining donor advised funds.			•		 -
а	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			"		
а	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		-			1
а	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 10	412		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				oxdot

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

Section A. Governing Body and Management

			V	
1a	Enter the number of voting members of the governing body		Yes	No
b	Enter the number of voting members that are independent 1b 26			ĺ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			İ
•	any other officer, director, trustee, or key employee?			х
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		
·	supervision of officers, directors or trustees, or key employees to a management company or other person?			v
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	3 4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	-	X
6	Does the organization have members or stockholders?	6	-	X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members	6		
, ,	of the governing body?	,		v
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		<u> </u>
ŭ	the year by the following			
а	The governing body?		х	
b	Each committee with authority to act on behalf of the governing body?	8a	X	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	8b		
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			v
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal	9		<u> </u>
	renue Code.)			
	and code.			
10a	Does the organization have local chapters, branches, or affiliates?	405	Yes	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10a		<u> </u>
U	affiliates, and branches to ensure their operations are consistent with those of the organization?	405		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	10b		
,,	form?		х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11	^	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	42-	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12a	_^	
	rise to conflicts?	425	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b		
·	describe in Schedule O how this is done	42-	х	
13	Does the organization have a written whistleblower policy?	12c	X	
14	Does the organization have a written document retention and destruction policy?	13	Λ.	x
15	Did the process for determining compensation of the following persons include a review and approval by	14		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ł
•	The organization's CEO, Executive Director, or top management official		v	
a b	Other officers or key employees of the organization	15a	<u>X</u>	v
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)	15b		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ĺ
104	with a taxable entity during the year?			v
L	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	16a	-	X
b	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			1
	·			ĺ
<u></u>	the organization's exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE Section 5104 requires on accompliant to make the Forms 1023 (as 1004 for a least to the filed NONE).			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X 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			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► JAMES A LUCAS AND COMPANY, LLP 4909 WESTERN BLVD, STE 200	010 07		
K/	ALEIGH NC 27606	919-85	<u>1 - 4</u>	<u>696</u>

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Form 990 (2009)

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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	Pos	ition (C) kallt	hat a _l	oply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
RONALD PENNY										
CHAIRMAN	2.00	X		X	<u> </u>			0	0	0
RANDY WELCH						ļ				
VICE CHAIR	2.00	X	L_	X	<u> </u>			0	0	
CRAIG CHANCELLOR										
VICE CHAIR	2.00	X		Х	<u> </u>			0	0	0
STATHIS POULOS		1			1					·
TREASURER	2.00	X		X		<u> </u>		0	0	0
JACKIE STARK										
SECRETARY	2.00	X	L	X				0	0	0
ERNEST FACKELMAN										
PAST CHAIR	2.00	X	<u> </u>	<u> </u>	_			0	0	0
				_						
		-		-		_				

Part	VII Section A. Officers	Directors, Trus	tees	, Ke	y Em	plo	/ees	and	Highest Compensated E	mployees (continued)						
	(A) Name and Title	(B) Average hours per	⊢ −		chec		hat a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of					
•		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	con f org an	noun othe npens rom ti janiza id rela aniza	r ation he ition ited			
			_				_	_								
					-											
						-		_								
								-								
			-			<u> </u>		-								
						<u> </u>		-								
			-			-		-								
			_													
1b 1	Total			•				>								
	Total number of individuals (inception of the compensation from	-			ose	liste	d abo	ove)	who received more than \$1	00,000 in						
	Old the organization list any fo				istee	kev	, emi	nlove	ee or highest compensated				Yes	No		
4 F	employee on line 1a? If "Yes," For any individual listed on line	complete Schedue 1a, is the sum of	ıle J f rep	for s ortat	uch ole co	indiv ompi	idual ensa	lion :	and other compensation fro	m	-	3		Х		
11	he organization and related or ndividual Did any person listed on line 1:									uch	-	4		х		
8	services rendered to the organ on B. Independent Contract	ization? If "Yes,"										5		x		
1 (Complete this table for your five compensation from the organization	e highest compe	nsate	ed in	depe	nde	nt co	ntrac	ctors that received more that	an \$100,000 of				-		
	Name and	(A) I business address						igapha	Descri	(B) ption of services		Co	(C) mpensa	tion		
								<u> </u>								
										· · · · · · · · · · · · · · · · · · ·						
						<u> </u>		-				_				
								-								
	Total number of independent of	contractors (include	dina	but r	not lir	niter	to ti	hose	listed above) who received	 1						
	more than \$100,000 in compe											0	. 000	· · · · ·		

Pa	rt V	iii Staten	nent of Reve	nue			<u> </u>			 -
		•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated carr	npaigns	1a						
ran	b	Membership di	. •	1b						
Contributions, gifts, grants and other similar amounts	С	Fundraising ev	ents	1c	-					
gift Iar	d	Related organi		1d						
imi	е	Government grants (1e		2,429				
tior er s	f	All other contribution	s, gifts, grants,		_		1	İ		
ibr		and similar amounts	not included above	1f		648,855	1			
ontr d	g	Noncash contribution	ns included in lines 1a-	1f :	\$	3,834				
ŏ ≅	h	Total. Add line	s 1a-1f			▶	651,284			
-en		<u> </u>			-	Busn Code				
Program Service Revenue	2a	ADMIN F	EE FOR ACCT	MGMT			518,684	518,684		
Re	b	CONFERE	NCE REG FEES	& MI	sc		9,790	9,790		
ice	С									· · · · · · · · · · · · · · · · · · ·
Š	đ									
Ē	0									
gre	f	All other progra	am service rever	nue						· · · · · · · · · · · · · · · · · · ·
P.		Total. Add line				•	528,474			
	3		ome (including d	lividenc	ls, interes	t, and				·
		other similar ai				· •	3,200			3,200
	4					oceeds ►				
	5	Royalties				>				
		,	(ı) Real		(n) F	Personal				
	6a	Gross Rents								
	ь	Less rental exps								
	С	Rental inc or (loss)		-						
	d	Net rental inco	me or (loss)			•	Ì		1	
	7a	7a Gross amount from		Other						
				1						
	b	Less cost or other								
	_	basis & sales exps				i				
	С	Gain or (loss)					1			
ļ	d	Net gain or (los	ss)				İ			
			om fundraising ever	nts [· · · · · · · · · · · · · · · · · · ·
nue		(not including \$	ioa.a.a.a.a.g							
Š		•	eported on line 1c)							
8		See Part IV, line		а						
Other Rever	b	Less direct ex		ь						
ŏ			(loss) from fundi	- (events		į		į	
			om gaming activities	- 1						
	""	See Part IV, line		a			1			
	ь	Less direct ex		ь						
			(loss) from gami	(vitios					·
		Gross sales of		ing acti	VIIIC3					
	100	returns and all	•							
				a b						
		Less cost of g		- 1						
	<u> </u>	_	(loss) from sales ellaneous Revenue		entory	Rusp Code				
	44	MISC	enancous Revenue			Busn Code				
	11a						····			
	b					 				
	C	AD =45=====				 				
	d	All other reven				<u> </u>			······································	
	9	Total. Add line				P	1 100 050	500 45		
	12	i otal Kevenu	 See instruction 	ns			1,182,958	528,474	0	3,200

Form 990 (2009) UI

Statement of Functional Expenses Part IX 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). (B) Program service (D) Fundraising (A) Total expenses (C) Management and Do not include amounts reported on lines 6b, expenses general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 26,613 558,069 531,456 Other salaries and wages Pension plan contributions (include section 401(k) 43,542 41,704 1,838 and section 403(b) employer contributions) 53,235 50,988 2,247 Other employee benefits 43,631 41,789 1,842 Payroll taxes 10 Fees for services (non-employees) a Management Legal Accounting Lobbying Professional fundraising services See Part IV, line 17 f Investment management fees Other 9 12 Advertising and promotion Office expenses 13 Information technology 14 15 Royalties 73,449 70,909 2,540 16 Occupancy 26,314 25,330 984 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 14,181 12,878 1,303 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 21,676 20,652 1,024 Depreciation, depletion, and amortization 22 Insurance 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) TECHNOLOGY UPDATE 44,433 44,433 37,450 35,316 EQUIPMENT RENTAL/MAINT 2,134 37,261 $34,66\overline{4}$ 2,597 PROFESSIONAL FEES 16,787 16,181 TELEPHONE/INTERNET 606 15,434 15,434 SPONSORED MARKETING COSTS 42,189 1,011 41,178 All other expenses 1,027,651 982,912 44,739 Total functional expenses. Add lines 1 through 24f 25 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

P	art X	Balance Sheet					
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest bearing				1	
	2	Savings and temporary cash investments			476,572	2	528,587
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			164,233	4	354,783
	5	Receivables from current and former officers, directors, tru		•			
		employees, and highest compensated employees. Comple	ete Pai	t II of			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined un					
		4958(f)(1)) and persons described in section 4958(c)(3)(B)) Com	plete			
Ø		Part II of Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
Š	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges	1	1	10,067	9	12,571
	10a	Land, buildings, and equipment cost or					
		other basis. Complete Part VI of Schedule D.	10a	296,908			
	ь	Less accumulated depreciation	10ь	273,230	38,444	10c	23,678
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	6,055	15	6,055		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			695,371	16	925,674
	17	Accounts payable and accrued expenses		44,814	17	118,304	
	18	Grants payable				18	
	19	Deferred revenue			12,415	19	13,944
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability Complete Part IV of S	Schedu	ile D		21	
Liabilities	22	Payables to current and former officers, directors, trustees	, key				
abi		employees, highest compensated employees, and disqual	ıfied				
Ξ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third p	arties			23	
	24	Unsecured notes and loans payable to unrelated third part	ies			24	
	25	Other liabilities Complete Part X of Schedule D			541	25	541
	26	Total liabilities. Add lines 17 through 25			57,770	26	132,789
es	İ	Organizations that follow SFAS 117, check here ▶ X	and				
Balances		complete lines 27 through 29, and lines 33 and 34.					
<u>=</u>	27	Unrestricted net assets			621,428	27	584,625
ä	28	Temporarily restricted net assets			16,173	28	208,260
Б	29	Permanently restricted net assets		_		29	
Fund		Organizations that do not follow SFAS 117, check here	• ▶ [
2		and complete lines 30 through 34.					
ţŞ	30	Capital stock or trust principal, or current funds				30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fu	und			31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or o	ınds		32		
et '	33	Total net assets or fund balances			637,601	33	792,885
Z	34	Total liabilities and net assets/fund balances			695,371	34	925,674

Form **990** (2009)

Form 990 (2009)

3a

3b

Х

the Single Audit Act and OMB Circular A-133?

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

SCHEDULE A (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF NORTH CAROLINA

Employer identification number 56-0564547

	Part	I Reas	on for Public Charity	Status (All organizations	must co	omplete	this p	art.) S	ee ins	tructio	ns		_
Th	e orga	anization is not a	private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)							
	1	A church, cor	vention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(<i>A</i>	۸)(i).						
:	2	5	cribed in section 170(b)(1)(A										
	3	i i		e organization described in secti-	on 170(b)	(1)(A)(iii).							
	<u>-</u> ا	ī		in conjunction with a hospital des				(A)(iii).	Enter th	e hospit	al's name		
	٠ ــــ	city, and state					. •(=,(•,	(, ,,(,,,		ocop	or o rioirie,		
	5	1 . *		a college or university owned or	onerated	hy a gove	rnmenta	ماء الميا	ecubad	ın			
•	<u> </u>	-	b)(1)(A)(iv). (Complete Part I	- ·	operated	by a gove	· · · · · · · · · · · · · · · · · · ·	i driit de	Scribcu				
	5	٠		vernmental unit described in sec	tion 170/	-V4VAV							
_	, X	i e		ubstantial part of its support from				the ee		hlio			
	(===	•			i a govern	ineniai un	it of Hori	i ine gei	ierai pu	DIIC			
,		7	section 170(b)(1)(A)(vi). (Co		,								
	8 <u> </u>	1		70(b)(1)(A)(vi). (Complete Part II		-4-b							
•	-	-	•	more than 33 1/3 % of its supposed to contain a				-		•			
		_		of functions—subject to certain e	•					IIS			
			•	d unrelated business taxable inco	•		i i tax) ir	om busi	nesses				
4		1	•	, 1975 See section 509(a)(2). (•	,	- > 4 4 >						
1:	. —	i -	•	xclusively to test for public safety		•			ı iba				
•	' -			xclusively for the benefit of, to pend organizations described in sections.						tion			
				ie type of supporting organization	•					uon			
		a Type		c Type III-Functions			ا انت	_ĭ					
	, [, –		inization is not controlled directly			ar mara		e III-Oti	ier			
	· [-		and other than one or more public				-		tion			
			ection 509(a)(2)	and other than one of more public	siy suppoi	teu organi	Zalions	Jeschbe	u III sec	.11011			
1	,			mination from the IRS that it is a	Type I Ty	ne II or T	vae III s	upportin	^				
			check this box	mination wom the into that it is a	Type I, Ty	pe ii, oi i	ype iii s	аррогин	y				
				on accepted any gift or contributi	on from a	ny of the							Ш
	9	following per		on accepted any gitt of contributi	on nom a	ny or the							
				atrols, outhor along or together we	th norson	donaribo	d io (ii)					Yes	A1-
				ntrols, either alone or together wi	in persons	s describe	u III (II)				144-43	162	No
			pelow, the governing body of member of a person describe	•							119(1)	<u> </u>	
			ontrolled entity of a person de								11g(II)		
	h		ollowing information about th								[11g(III)	l]
_	h (1) Nar	ne of supported	(II) EIN	(iii) Type of organization	(m) to the		60 Date		1,,,,,,		(\ A		
		rganization	("/ ""	(described on lines 1–9		organization sted in your		ou notify nzation in	organizat	s the ion in col	(vii) Am- supp		
				above or IRC section		document?	∞l (ı)			zed in the			
				(see instructions))	Yes	No	Yes	ort?	Yes	No No			
_					163		163	No	162	140			
				1			ĺ						
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т,	tal			1	1	1	l	İ	1				

56-0564547 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support

Ca	lendar 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")	548,301	599,431	645,220	601,558	651,284	3,045,794
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	548,301	599,431	645,220	601,558	651,284	3,045,794
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						3,045,794
	tion B. Total Support						
Ca	fendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	548,301	599,431	645,220	601,558	651,284	3,045,794
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,067	18,479	17,656	6,972	3,200	56,374
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	L1				γ	3,102,168
12	Gross receipts from related activities, etc. (s					12	3,507,156
13	First five years. If the Form 990 is for the o		econd, third, fourth	i, or fifth tax year as	s a section 501(c)(3	5)	. —
Sec	organization, check this box and stop here tion C. Computation of Public Su			-			
14	Public support percentage for 2009 (line 6,	· · · · · · · · · · · · · · · · · · · 	<u> </u>	n)			
15	Public support percentage from 2008 Sched			''))		15	98.18% 98.09%
16a	33 1/3 % support test—2009. If the organi			and line 14 is 33 1	1/3 % or more, chec		98.09 /6
	and stop here. The organization qualifies a			, 4.10 11.10 17 18 00 1	ino no or more, ener	or this box	► X
ь	33 1/3 % support test—2008. If the organic		_	r 16a, and line 15 is	s 33 1/3 % or more	check this	,
	box and stop here. The organization qualifi				7 00 170 12 01 111010	oricon triis	▶ [
17a	10%-facts-and-circumstances test—2009				or 16b, and line 14	s 10% or	ـــا
	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumsta						▶ □
þ	10%-facts-and-circumstances test—2008					e 15 is 10% or	· •
	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumsta						▶ []
18	Private foundation. If the organization did					structions	▶ [

Part III		Support Schedule for Organizations Described in Section 509(a)(2)
	•	(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support						
Ca	lendar 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					 	
с 8	Add lines 7a and 7b	<u></u>				 	
0	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	<u></u>	<u> 1</u>	1	İ	<u> </u>	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6		·		(-,	(0,200	(1) 10101
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						
С	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)	6					
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, fourt	h, or fifth tax year a	as a section 501(c)	(3)	
	organization, check this box and stop here	<u> </u>					▶ □
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2009 (line 8,		•	(f))		15	%
16	Public support percentage from 2008 Sche					16	%
	tion D. Computation of Investme						
17	Investment income percentage for 2009 (lin		•	column (f))		17	%_
18	Investment income percentage from 2008 5					18	%_
19a	33 1/3 % support tests—2009. If the organization is not more than 33 1/3 %, check this bo						<u> </u>
b	33 1/3 % support tests—2008. If the organ						P [_]
-	line 18 is not more than 33 1/3 %, check th						▶ □
20	Private foundation. If the organization did						H
			,,				

56-0564547

Page 4

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below.

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

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Nar	ne of organization UNITED WAY OF NORTH	CAPOLTNA		Employer identifi 56-05645	
Par	t I-A Complete if the organization is exe		or is a sectio		
1	Provide a description of the organization's direct and indire			oz. o.gazao	
2	Political expenditures	· F - · · · · · · · · · · · · · · ·		▶ \$	
3	Volunteer hours			, · -	
				_	
Par	t I-B Complete if the organization is exe	mpt under section 501(c)	(3).		
1	Enter the amount of any excise tax incurred by the organiz	zation under section 4955		▶ \$ _	
2	Enter the amount of any excise tax incurred by organization	on managers under section 4955		> \$	
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV				
Pai	t I-C Complete if the organization is exe	mpt under section 501(c)	, except secti	on 501(c)(3).	
1	Enter the amount directly expended by the filing organizati	ion for section 527 exempt function	1		
	activities			▶ \$ _	
2	Enter the amount of the filing organization's funds contribu	ited to other organizations for sect	ion		
	527 exempt function activities			▶ \$ _	
3	Total exempt function expenditures Add lines 1 and 2 En	iter here and on Form 1120-POL,			
	line 17b			▶ \$ _	
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses and employer identification no	· ·	ū	•	
	were made. For each organization listed, enter the amoun			·	
	contributions received that were promptly and directly deliv	•		separate segregated	
	fund or a political action committee (PAC). If additional spa	1	T	T	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization s	(e) Amount of political contributions received and
				funds if none enter -0-	promptly and directly
					delivered to a separate
			ļ		political organization. If none enter 0-
			 	 	
		 			
				 	
			ļ		
				<u> </u>	
			<u> </u>	+	
			l		
		 	 	 	
For I	Privacy Act and Paperwork Reduction Act Notice, see the	he Instructions for Form 990 or	990-EZ.	Schedule C (For	m 990 or 990-EZ) 2009

Schedu	ule C (Form 990 or 990-EZ) 2009 UNI	TED WAY OF NORTH CAROLINA	56-056454	2 Page 2
Part	II-A Complete if the organiz under section 501(h)).	ation is exempt under section 501(c)(3) ar	nd filed Form 5768 (elect	tion
		on belongs to an affiliated group on checked box A and "limited control" prov	risions apply.	
		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
b 1 c 1 d (e 1 f (Fotal lobbying expenditures to influence pub Fotal lobbying expenditures to influence a le Fotal lobbying expenditures (add lines 1a an Other exempt purpose expenditures Fotal exempt purpose expenditures (add line Lobbying nontaxable amount. Enter the amounts	gislative body (direct lobbying) d 1b) es 1c and 1d)	3,835 3,835 1,027,653 1,031,488	
0	f the amount on line 1e, column (a) or (b) is. Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$17,000,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	The lobbying nontaxable amount is 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000		
g (Grassroots nontaxable amount (enter 25% o	of line 1f)	44,537	
h S	Subtract line 1g from line 1a. If zero or less,	enter -0-	0	
1.5	Subtract line 1f from line 1c If zero or less, or	enter -0-	1 0	

4-Year Averaging Period Under Section 501(h)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

section 4911 tax for this year?

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period												
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total							
2a Lobbying non-taxable amount	206,206	206,261	212,617	178,149	803,233							
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,204,850							
c Total lobbying expenditures	3,889	3,922	3,756	3,835	15,402							
d Grassroots nontaxable amount	51,552	51,565	53,154	- 44,537	200,808							
e Grassroots ceiling amount (150% of line 2d, column (e))					301,212							
f Grassroots lobbying expenditures												

Schedule C (Form 990 or 990-EZ) 2009

Yes No

Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	T filed I	Form	5768			
	, telection under section of this.	(;	a)		(b)		
		Yes	No		Amo	unt	-
1	During the year, did the filing organization attempt to influence foreign, national, state or local	-		······			
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of						
а	Volunteers?						
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?						
	Other activities? If "Yes," describe in Part IV						
i	Total Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			-			
	If "Yes," enter the amount of any tax incurred under section 4912						
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					*******	
	t III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5).	or se	ction			
	501(c)(6).						
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			[1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."				d		
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political						
	expenses for which the section 527(f) tax was paid).						
a	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3 what portion of the						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				
Pa	rt IV Supplemental Information						

Part IV Supplemental information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

Part IV Supplemental Information (continued)

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 Open to Public

Inspection Name of the organization Employer identification number UNITED WAY OF NORTH CAROLINA 56-0564547 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I 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 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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 important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 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

Assets included in Form 990, Part X

Schedule D (Form 990) 2009

23,678

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

UNITED WAY OF NORTH CAROLINA

Schedule D (Form 990) 2009

56-0564547

Page 3

organization's liability for uncertain tax positions under FIN 48

Sche	dule D (Form 990) 2009 UNITED WAY OF NORTH CAROLINA 56-056454		Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stateme	ents	
1	Total révenue (Form 990, Part VIII, column (A), line 12)	1	1,182,958
2	, Total expenses (Form 990, Part IX, column (A), line 25)	2	1,027,651
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	155,307
4	Net unrealized gains (losses) on investments	4	-21
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1
9	Total adjustments (net) Add lines 4 through 8	9	-20
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	155,287
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	ırn	
1	Total revenue, gains, and other support per audited financial statements	1	1,182,937
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a -21		
ь	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d			
е		2e	-21
3	Subtract line 2e from line 1	3	1,182,958
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		
b			
c		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,182,958
	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ro		
1	Total expenses and losses per audited financial statements	1	1,027,650
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		1,021,030
a	Donated services and use of facilities 23		
b			
c	· · ·		
d			
	Add lines 2a through 2d	٠.	
е 3	Subtract line 2e from line 1	2e	1,027,650
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	1,027,650
a			
	Add lines 4a and 4b	4c	1 007 (51
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,027,651
	art XIV Supplemental Information		
	plete 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		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
-	part to provide any additional information		
_ P	ART XI, LINE 8 - RECONCILATION OF CHANGES - OTHER		
В	OOK / TAX DEPRECIATION DIFFERENCE \$		1
			. – – – – –
P	ART XIII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTH	ER	
	OOK / TAX DEPRECIATION DIFFERENCE \$		1
	CON T THE DELECTATION DILIBRENCE		· - -
_			
			. <i>-</i>

Sche	dule	e D	(For	m 99	90) 2	2009)	UN	1II	CEI) V	(AN	7 (F	NO	RI	H	CZ	ARC	LI	NA	1				5	6 -	D 5	64	5:4	7						Pag	ie 5
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SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

• Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

UNITED WAY OF NORTH CAROLINA

Employer identification number 56-0564547

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS
ASSISTANCE WITH IMPLEMENTATION OF "211" CALL NETWORK

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FORM 990 IS REVIEWED BY THE BOOKKEEPER AND THE PRESIDENT BEFORE FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
OFFICERS AND DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST
STATEMENT EACH YEAR

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL BOARD REVIEWS COMPARABLE DATA AND PERFORMANCE OF INDIVIDUAL

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION UPON REQUEST

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB No 1545-0172 2009

Attachment Sequence No 6

Name(s) shown on return

UNITED WAY OF NORTH CAROLINA

► See separate instructions.

Identifying number 56-0564547

	<u> </u>	***************************************						1		
	ess or activity to which this form relates	OM						-		
	NDIRECT DEPRECIATI It Election To Expense		orty Under Se	ction 1	70					
Га	Note: If you have a	•	-			comi	olete Par	1 1		
1	Maximum amount See the instructi				siole you	COM	nete i ai	1	1	250,000
2	Total cost of section 179 property p	•		303				ľ	2	
3	Threshold cost of section 179 proper	,	•	structions	;)			Ì	3	800,000
4	Reduction in limitation Subtract line	•	•	01.001.011	-,			İ	4	
5	Dollar limitation for tax year Subtract line			ned filing s	separately, see	nstruc	ctions	Ī	5	
6	(a) Description	of property		(b) Cost	(business use	only)	(c) E	lected cost		
	· · · · · · · · · · · · · · · · · · ·									
_										
7	Listed property Enter the amount fr	om line 29				7				
8	Total elected cost of section 179 pro	operty Add amounts	in column (c), lines	s 6 and 7					8	
9	Tentative deduction Enter the sma	ller of line 5 or line 8							9	
0	Carryover of disallowed deduction f	rom line 13 of your 20	008 Form 4562						10	
1	Business income limitation. Enter th	ne smaller of business	s income (not less	than zero	o) or line 5 (s	ee ins	tructions)	Į	11	
2	Section 179 expense deduction Ad	d lines 9 and 10, but	do not enter more	than line	11		,		12	
3	Carryover of disallowed deduction t				>	13				
lote	Do not use Part II or Part III below f									
Pa	rt II Special Depreciati	on Allowance a	nd Other Depi	reciatio	on (Do no	t incl	<u>ude liste</u>	d prope	<u>ty.) (</u>	See instr.)
4	Special depreciation allowance for o	qualified property (oth	er than listed prop	erty) plac	ed in service	:			1	
	during the tax year (see instructions	s)							14	
5	Property subject to section 168(f)(1) election							15	
6	Other depreciation (including ACRS		- 						16	18,931
Pa	rt III MACRS Depreciati	ion (Do not inclu			See instru	ction	s)			
				ion A				- 1		
17	MACRS deductions for assets place	-	•						17	0
18	If you are electing to group any assets place and a section B	aced in service during th Assets Placed in Se				-			*****	
	Section B—	(b) Month and year	(c) Basis for depri			Gene	iai Debied	nation Sys	stein	
	(a) Classification of property	placed in service	(business/investm only-see instruc	ent use	(d) Recovery period	(e) (Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property									
b	5-year property									
С	7-year property]								
d	10-year property									
9	15-year property							·		
f	20-year property									
9	25-year property				25 yrs			S/L		
h	Residential rental			_	27 5 yrs		MM	S/L		
	property				27 5 yrs		ММ	S/L		
i	Nonresidential real				39 yrs		MM	S/L		
	property						ММ	S/L		
	Section C—A	ssets Placed in Sen	vice During 2009	Tax Year	Using the	Alterna	ative Depr	eciation S	ystem	
20a	Class life							S/L		
b	12-year				12 yrs			S/L		
С	40-year				40 yrs		ММ	S/L		
Pa	art IV Summary (See ins	tructions.)								
21	Listed property Enter amount from	line 28							21	
22	Total. Add amounts from line 12, li	nes 14 through 17, lir	nes 19 and 20 in co	olumn (g)	, and line 21	Enter	here			
	and on the appropriate lines of you	r return Partnerships	and S corporation	s—see ir	nstructions		,		22	18,931
23	For assets shown above and place	-	e current year, ent	er the						
	portion of the basis attributable to s	ection 263A costs				23				i

Pa	art V	property use	erty (Include a d for entertair chicle for which yo) through (c) of Se	nment, red	creation the stan	n, or a	muser	ment.) e or ded	uctina lei	•		•		puters	s, and	, age 2
	•		—Depreciation a							for limit	s for pas	senger	automobi	les)		
24a	Do you ha	ave evidence to suppo	ort the business/inve	stment use cla	aimed?		Yes	No	24b	lf "Yes,"	is the e	vidence v	written?		Yes	No
	(a) of property vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or bas	other		(e) s for depr iness/invi use only	estment	(f) Recover period	, i	(g) lethod/ nvention		(h) Depreciati deductio			section cost
25	•	depreciation allowa	•					g the								
		and used more tha		-		e instruc	tions)				2	5			<u> </u>	
26	Property	used more than 5	0% in a qualified	business use	<u> </u>				 	1		$\overline{}$				
			<u> </u>						<u> </u>	<u> </u>		_				
			_%													
27	Property	used 50% or less	in a qualified bus	iness use					,							
			%							S/I						
			%							S/I						
28	Add am	ounts in column (h)		27 Enter b	ere and	on line 2	1 nane	1	L	1 3/1	2	8			1	
29		ounts in column (i),					r, page	•						29	-	
							tion on	Use of	Vehicles							
		section for vehicles es, first answer the qu										you pro	vided vel	nicles		
30	Total bu	siness/investment	miles driven			a)	(b)	(c)	(d)	(4	——. — ∋)	1	f)
	during tl	ne year (do not ind	lude	icle 1	Veh	icle 2	Veh	Vehicle 3 Veh			Veh	Vehicle 6				
	commut	ing miles)							ļ							
31		mmuting miles driv	• ,						ļ							
32		ner personal (nonce	٠,	driven									<u> </u>			
33		les driven during th	ne year Add													
34		through 32 vehicle available f	or nersonal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	1 11-
J-4		ng off-duty hours?	or personal		162	140	162	NO	162	100	162	I NO	res	I NO	res	No
35		vehicle used prim	arily by a						1				1			
	more th	an 5% owner or rel	ated person?								L	1				
36	Is anoth	er vehicle available	for personal use	2												
			Section C-Qu	estions for	Employ	ers Who	Provid	e Vehic	les for U	se by T	heir Em	ployees				
		questions to deterr			to comp	eleting S	ection B	for vehic	les used	by emp	loyees v	vho are r	not			
		owners or related						 .							1	
37	-	maintain a written p ployees?	oolicy statement t	hat prohibits	all pers	onal use	of vehic	les, ınclı	iding con	nmuting	, by				Yes	No
38	Do you	maintain a written p	policy statement t	hat prohibits	persona	al use of	vehicles	, except	commut	ng, by y	our					
	employe	es? See the instru	ctions for vehicle	s used by co	rporate	officers,	directors	s, or 1%	or more	owners						
39	-	treat all use of vehi	• • •	•												
40		provide more than				n inform	ation fro	m your e	mployee	s about	the					
44		ne vehicles, and re						0.40								
41	•	meet the requirements 37	<u> </u>	•				•		•					<u> </u>	l
	art VI	your answer to 37 Amortization		is res, uo	HOL CON	ipiete Se	Clion B	ioi the C	overed v	enicies					<u> </u>	
	<u> </u>	Amortization								Π.	. T	(e)				
		(a) Description of costs	s	(b) Date amo begi	rtization			(c) ortizable mount		Co sec	de	Amortiza period percent	or	Amortiz	(f) ation for th	ns year
42	Amortiz	ation of costs that t	pegins during vou	r 2009 tax v	ear (see	Instruction						, =: ===	<u> </u>			
					/500		- /			Γ			T		_	
						\perp										
43		ation of costs that t	•	•									43			,744
44_	Total. A	dd amounts in colu	umn (f) See the ii	nstructions fo	or where	to repor	t	_					44		2	,744

Federal Asset Report Form 990, Page 1

	•			
<u>Asset</u>	Description	Date In Service	Cost	Bus Sec Basis % 179Bonus for Depr PerConv Meth Prior Current
	MACRS:			
88	P 168 UPGRADE	2/19/98	775	775 3 MQ S/L 775 0
89	3 SOUND CARDS	5/27/98	213	213 3 MQ S/L 213 0
90	P 233 UPGRADE	5/27/98	478	478 3 MQ S/L 478 ()
91 92	MODEM/MONITOR DELL LAPTOP	5/27/98 5/27/98	499 2,849	499 5 MQ S/L 499 ()
93	M/S OFFICE 97	3/09/98	1,075	2,849 5 MQ S/L 2,849 0 1,075 3 MQ S/L 1,075 0
94	15 ACER MONITOR	7/09/98	275	1,075 3 MQ S/L 1,075 () 275 5 MQ S/L 275 0
95	PHONE SYSTEM	12/28/98	7,166	7,166 5 MQ S/L 7,166 0
96	Intel 400 MHz computer	2/15/99	1,375	1,375 5 MQ S/L 1,375 0
97	Fax Machine	2/23/99	2,380	2.380 5 MQ S/L 2,380 0
98	Modem	3/03/99	150	150 5 MQ S/L 150 0
.99	Telephone	4/20/99	268	268 5 MQ S/L 268 0
100	Modem	5/21/99	140	140 5 MQ S/L 140 0
101 102	Network Equipment	6/24/99 8/02/99	835 1,773	835 5 MQ S/L 835 0
102	Dell Computer Dell Computer	11/01/99	1.773	1.773 5 MQ S/L 1,773 0 1.996 5 MO S/L 1,996 0
104	Dell Computer	11/01/99	1.996	1.996 5 MQ S/L 1.996 0 1.996 5 MQ S/L 1.996 0
105	Printer	11/30/99	400	400 5 MQ S/L 400 ()
106	Brother Intellifax	11/30/99	260	260 5 MQ S/L 260 0
		=	24,903	<u>24.903</u> <u>24.903</u> <u>0</u>
Otha-	Depreciation			
<u>Other</u>	Depreciation: (5) Chair mats	3/15/82	180	180 5 MO S/L 180 0
4	(6) Double Ped Desks	2/15/87	7,741	180 5 MO S/L 180 0 7,741 10 MO S/L 7,741 0
5	(2) Single Ped Desks	2/15/87	1,959	1,959 10 MO S/L 1,959 0
6	(2) Secretarial returns	2/15/87	1,016	1,016 10 MO S/L 1 016 0
7	(6) Chairs - professional	2/15/87	3,016	3,016 10 MO S/L 3.016 0
8	(2) Chairs - operator	2/15/87	928	928 10 MO S/L 928 0
9	(6) Bookcases	2/15/87	2.432	2,432 10 MO S/L 2 432 0
10	Executive chair	10/15/87	358	358 10 MO S/L 358 0
11	Credenzas	2/15/87	528	528 10 MO S/L 528 0
12 13	Typing stand (3) Folding tables	1/25/90	35	35 5 MO S/L 35 0
13	(3) Folding tables Credenza	12/01/92 1/06/93	107 199	107 5 MO S/L 107 0
15	File	1/06/93	99	199 5 MO S/L 199 0 99 5 MO S/L 99 0
16	Bookcase	1/06/93	109	99 5 MO S/L 99 () 109 5 MO S/L 109 ()
17	Various office equipment	12/15/77	844	844 10 MO S/L 844 ()
18	Casio calculator	4/15/80	125	125 5 MO S/L 125 0
19	(3) Tape recorders	5/15/83	135	135 5 MO S/L 135 0
20	3M Typewriter	5/15/83	1,395	1,395 10 MO S/L 1,395 0
21	(4) Tape recorders	4/15/84	264	264 5 MO S/L 264 0
22	IBM Typewriter	12/15/84	1,270	1.270 10 MO S/L 1.270 ()
23	Flip charts	4/15/85	210	210 5 MO S/L 210 0
24 25	Bell & Howell projector Slide projector	4/15/85	895	895 10 MO S/L 895 0
26	Minolta camera lens	12/15/85 7/15/86	964 400	964 10 MO S/L 964 0 400 5 MO S/L 400 0
27	(6) IBM Computer/software	6/15/87	25,242	400 5 MO S/L 400 0 25,242 5 MO S/L 25,242 0
28	Pedestals & trays/IBM	8/15/87	381	381 5 MO S/L 23,242 (7
29		6/15/87	180	180 5 MO S/L 180 0
30	Gifts in Kind	7/15/87	45	45 5 MO S/L 45 ()
31	Converting typewriter	7/15/87	381	381 5 MO S/L 381 ()
32	To Printer	9/15/87	279	279 5 MO S/L 279 0
33	Equipment	10/15/87	134	134 5 MO S/L 134 0
34	Dictaphone Computer equipment	2/15/88	339	339 5 MO S/L 339 0
35 36	3M LCC30 Cassette	8/15/88 2/09/89	635 495	635 5 MO S/L 635 0
37	Portable cassette & audio equipment	5/02/89	136	495 5 MO S/L 495 0 136 5 MO S/L 136 0
38	(2) Cables for printers	7/14/89	30	136 5 MO S/L 136 0 30 5 MO S/L 30 0
39	Software	8/21/89	82	82 5 MO S/L 82 0
40	Fax machine	10/06/89	995	995 5 MO S/L 995 0
41	IBM Computer part	10/27/89	75	75 5 MO S/L 75 0
42	Cartridge	12/01/89	255	255 5 MO S/L 255 0
43	Telephone & answering machine	9/08/91	91	91 5 MO S/L 91 0
44	Telephone system	11/04/91	3,570	3,570 5 MO S/L 3,570 0
45	Voice mail system	12/24/91	2.895	2,895 5 MO S/L 2.895 0
46 47	Lanier 3400 Fax machine Modem	9/18/92	1.799	1,799 5 MO S/L 1,799 0
47	Switchbox from fax to modem	2/28/92 2/28/92	514 225	514 5 MO S/L 514 () 225 5 MO S/L 225 ()
70	Senoon from tax to modelli	2120172	223	225 5 MO S/L 225 ()

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	•	Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> 179Bonus _	for Depr	PerConv Meth	Prior	Current
50 51	Telephone equipment/voic mail Memory/Card/Board	2/03/93 3/11/93	477 220		477 220	5 MO S/L 5 MO S/L	477 220	0
52	Smartmax Fax switch	5/13/93	182		182	5 MO S/L	182	0
53	Software	10/26/93	339		339	5 MO S/L	339	0
54	Microwave oven	11/12/93	230 430		230	5 MO S/L	230	0
55 56	Telecorder Software-Geoworks Pro	11/12/93 2/25/93	600		430 600	5 MO S/L 5 MO S/L	430 600	0
57	Software-Geoworks	7/07/93	89		89	5 MO S/L	89	ő
58	Laser printer	1/12/94	742		742	5 MO S/L	742	0
	Computer program	3/29/94 7/01/95	106		106	3 MO S/L	106	0
60 61	Two phone faxes Tony's software	7/01/95 7/15/95	647 838		647 838	5 MO S/L 5 MO S/L	647 838	$0 \\ 0$
	Three computers	8/15/95	9.696		9,696	5 MO S/L	9.696	0
63	Gateway 2000 computer	4/18/96	3.699		3 699	5 MO S/L	3.699	0
64	Flat scanner	8/30/96	340		340	5 MO S/L	340	0
65 67	Internal modem - SECC Fax machine	10/15/96 9/21/96	292 170		292 170	5 MO S/L 5 MO S/L	292 170	0
68	Bookcase	2/17/97	108		108	5 MO S/L	108	ő
69	3 panel table top & carry case	6/09/97	336		336	5 MO S/L	336	0
70	Credenza, oak table	10/21/97	388		388	5 MO S/L	388	0
71 72	Hutch, files and storage	4/01/97 4/01/97	315 643		315	5 MO S/L	315	0
73	Credenza, File and Storage Exec desk&chr.credenza,table&6 chrs	10/30/97	2,262		643 2,262	5 MO S/L 5 MO S/L	643 2 262	0
74	Software upgrades	7/22/97	160		160	3 MO S/L	160	ő
75	Intel pentium system	8/20/97	2.044		2,044	5 MO S/L	2 044	0
76 77	HP 5 Laserjet	8/20/97 8/31/97	1.350 284		1,350	5 MO S/L	1,350	0
78	Digital telephone answering system Gateway Solo 2300 laptop	9/30/97	2,500		284 2,500	5 MO S/L 5 MO S/L	284 2,500	0
79	SECC Tracking System	11/14/97	3,013		3,013	5 MO S/L	3,013	ő
80	McAffee VMS	12/15/97	387		387	5 MO S/L	387	0
81	HP 5 Printer and networking	6/09/97	2,375		2.375	5 MO S/L	2.375	0
82 83	Pentium system board & processor 3 Intel Pentium systems	7/15/97 11/14/97	738 5.082		738 5 082	5 MO S/L 5 MO S/L	738 5.082	0
84	McAffee VMS	12/15/97	387		387	5 MO S/L	3.082	0
85	Software	12/30/97	95		95	5 MO S/L	95	0
86	Dell Inpiron Laptop software and	12/30/97	4.504		4.504	5 MO S/L	4.504	0
87 107	Software File Cabinet	12/30/97 3/02/00	95 1.082		95 1,082	5 MO S/L 7 MO S/L	95 1,082	0
108	Dell T5000	3/02/00	1,918		1,918	5 MO S/L	1,918	0
109	Dell T600 computer	5/01/00	2,390		2,390	5 MO S/L	2.390	Ŏ
110	Desk chair	5/31/00	180		180	7 MO S/L	180	0
111	Panasonic UF-895 Fax Dell 4100 Series computer	5/31/00 10/02/00	2,378 1,897		2.378 1,897	5 MO S/L 5 MO S/L	2.378 1,897	0
114	Dell Dimension 4100- (Laura's)	9/01/01	3.598		3,598	5 MO S/L	3 598	0
115	HP Laser Jet 8150 DN	7/01/01	3.974		3,974	5 MO S/L	3,974	Ö
117	Computer	6/30/00	1,434		1,434	5 MO S/L	1 434	0
119 120	Computer Server-partial	9/03/02 9/13/02	883 1,500		883 1,500	5 MO S/L 5 MO S/L	883 1.500	0
121	Computer equipment	9/20/02	1,929		1.929	5 MO S/L	1.929	0
122	Computer equipment	4/02/02	300		300	5 MO S/L	300	ŏ
123	Server-remainder	1/31/03	1.584		1,584	5 MO S/L	1 584	0
124 125	Dell computer Glass table top	4/09/03 4/22/03	1,669 209		1,669	5 MO S/L 7 MO S/L	1 669	0
123	Dell Dimension 2350 computer	6/27/03	3,136		209 3,136	7 MO S/L 5 MO S/L	169 3,136	30 0
128	Dell computers	12/12/03	1,486		1,486	5 MO S/L	1.486	ő
129	Dell computer	12/15/03	2,031		2.031	5 MO S/L	2,031	0
130	2 Global chairs	12/30/03	720		720	7 MO S/L	514	103
131 132	Dell PowerEdge 2600 @ 1/2 Dell Inspiron 8600 and OptiPlex	1/01/03 1/01/03	4,243 4,631		4,243 4,631	5 MO S/L 5 MO S/L	4,243 4,631	0
133	Software for server	1/16/03	1,371		1,371	5 MO S/L	1,371	0
134	Software for server	12/19/03	1,371		1,371	5 MO S/L	1,371	0
135	Dell PowerEdge 2600 @1/2	1/01/03	4,243		4,243	5 MO S/L	4.243	0
136	MS Wireless keyboard and mouse Inspiron 8600 Pentium M	1/07/04 1/12/04	270		270 2,770		270	0
137	Creative Suite Premium Software	2/12/04	2.770 390		390	5 MO S/L 3 MO S/L	2 770 390	0
139	Equipment-Store Palm	1/31/04	351		351	5 MO S/L	345	6
140	Equipment-Dell Marketing	2/28/04	2,356		2.356	5 MO S/L	2.278	78
141 142	Print Server Server consulting and install	2/29/04 3/31/04	176		176	5 MO S/L	170	6
142	Equipment-Accupe	3/31/04	2,795 246		2,795 246	5 MO S/L 5 MO S/L	2,655 234	140 12
144	Equipment-Best Buy	3/31/04	556		556	5 MO S/L	528	28
145	Equipment-Consistent C	3/31/04	75		75	5 MO S/L	71	4
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	•	Date		Bus Sec	Basis			
Asset		In Service	Cost	<u>%</u> 179Bonus		PerConv Meth	Prior	Current
146 147	Equipment-Consistent C Symantec Antivirus Software	3/31/04 4/11/04	249 427		249 427	5 MO S/L 3 MO S/L	237 427	12
148	Digital Camera	4/26/04	160		160	5 MO S/L	150	ıŏ
149	Intel 2 4 Bundle	4/26/04	483		483	3 MO S/L	483	0
150	Intel 2 4 Bundle Equipment-staples	4/26/04 4/30/04	483 139		483 139	3 MO S/L 5 MO S/L	483	0
152	Equipment-First Citizens	8/31/04	3.168		3,168	5 MO S/L	130 2,746	422
153	Equipment-Procomp city	9/30/04	225		225	5 MO S/L	191	34
154	Equipment-Home Depot	9/30/04	413		413	5 MO S/L	351	62
155 156	Symantec Antivirus 11 Chairs	4/11/04 4/12/05	267 1,168		267 1,168	3 MO S/L 7 MO S/L	267	0
157	7 Lateral files	4/12/05	1,645		1.645	7 MO 3/L 7 MO S/L	645 881	167 235
158	Storage Credenza	4/12/05	155		155	7 MO S/L	83	22
159	2 Chairs	4/12/05	259		259	7 MO S/L	139	37
160 161	Dell Computer-SECC Server Pix Firewall Software -SCO	3/28/05 3/28/05	9,699 302		9,699 302		7.274 302	1 940 0
162	Computer	3/28/05	5,730		5,730		4.298	1.146
163	Andar - License Fee Helix	4/12/05	14.750		14,750		11 063	2.950
164	Sears - Refrigerator	4/30/05	435		435	5 MO S/L	319	87
165 166	Software for new server Techsoup - software	4/30/05 5/31/05	718 200		718 200	3 MO S/L 3 MO S/L	718 200	0
167	Andar - training software	6/28/05	2,640		2,640		1 848	0 528
168	Canon IP 4000 - Office Max	7/31/05	120	,	120		82	24
169	Canon MP780 CLR - Staples	7/31/05	250		250		171	50
170 171	Key Concepts - Data Conversion Celito Net - Install Server	7/16/05 5/25/05	5,000 3,401		5,000 3,401	3 MO S/L 5 MO S/L	5 000	0
172	Celito - Software	3/18/05	495		495		2 437 495	680 0
173	Celito - Printer	3/18/05	765		765		574	153
174	Sears - Refrigerator	4/30/05	214		214	5 MO S/L	157	42
175 176	Celito - Install Server Intuit - Software	5/25/05 9/30/05	2.388 191		2.388 191	5 MO S/L 3 MO S/L	1,711 191	478
177	Alltel - Blackberry	12/31/05	360		360		216	() 72
179	Dell Dimension C521	1/02/07	359		359		144	71
180	2006 Ford Truck F-150	12/12/06	21,649		21,649		9.020	4 330
181 182	UPIC software license fee -plege processing Palm trio - Vicky	8/29/07 1/08/07	11,250 319		11,250 319		5.000 127	3.750
183	Palm trio- Jill	1/08/07	350		350		140	64 70
184	Digital camera	12/24/07	405		405		81	81
185	Quickbooks Software	7/01/08	192		192		32	64
186 187	IBM Computer Chair	11/01/08 8/03/08	1,151 100		1,151 100		38 6	231 14
188	Desk and Chair	6/01/08	957		957		140	239
191	2 Lateral file cabinets	4/12/05	470		470	7 MO S/L	252	67
192	3 Lateral file cabinets	4/12/05	705		705		378	100
193 194	Computer 3 IBM Thinkpads	4/01/09 11/20/09	696 3,834		696 3,834		0	104 64
195	Smart UPS Tower	5/29/09	649		3.634 649		0	76
196	Chair	8/25/09	313		313	7 MO S/L	Ő	15
197	Computer	12/15/09	969		969		0	16
198	Computer	12/15/09	450		450		0	8
	Total Other Depreciation	-	272,009		272,009		229.399	18.931
	Total ACRS and Other Deprec	iation	272,009		272.009		229,399	18 931
	Total ACKS and Other Deprec	:	272,009		272,009		229.399	10 931
	tization:							
178	NC 211 Software Sold/Scrapped 6/30/09	3/15/06	49,386		49 386	3 MOAmort	46.642	2.744
	,,	•	49,386		49,386	•	46,642	2 744
}		-				•		
	Grand Totals		346.298		346,298		300 944	21.675
	Less: Dispositions and Transfel	rs	49.386		49,386		46.642	2.744
	Less: Start-up/Org Expense		0		0		0	0
	Net Grand Totals	=	296,912		296,912	<u>!</u>	254,302	18.931
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Federal Statements

Taxable Interest on Investments

Description		Amount	Unrelated Business Code		Postal Code	Acquired after 6/30/75
INVESTMENT INCOME	\$_	3,200		14		
TOTAL	Ś	3.200				

56-0564547	Federal Stat	Statements		
	Form 990, Part IX, Line 24f	Part IX, Line 24f - All Other Expenses		
Description	Total Expenses	Program Service	Management & General	Fund Raising
ACC EXPENDITURES SUPPLIES AND COPYING POSTAGE/FREIGHT DEPARTMENT EXECUTIVE PROG PRINTING/PUBLICATIONS MEMBERSHIP DUES AND FEES LIABILITY INSURANCE BANK ACCOUNT AND MERCHANT MISCELLANEOUS SOLICITATION AND LOBBYING TRAINING/DEVELOPMENT "211" EXPENDITURES TOTAL	\$ 14,000 8,409 8,406 2,653 2,454 1,946 1,298 668 300 200 200 200 182 300 200 182	\$ 14,000 8,315 8,315 2,653 2,378 1,157 603 603 178 41,178	\$ 515 91 76 61 18 65 22 22 22 22 22	, , , , , , , , , , , , , , , , , , ,

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