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# Form **990** -

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545 0047 2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2010 calend	dar year, or tax year beginning , 2010, and ending	<del></del>	,	
В	Check if a				er Identifica	tion Number
_		ess change	United Way of Collier County, Inc.	102609	6	
	$\vdash$	e change	848 First Avenue North #240	one number	<u></u>	
	$\vdash$	return	Naples, FL 34102	230	-261-7	112
	H-1			233	201 /	114
	HI	inated				2,853,892.
	$\vdash$	nded return	F Name and address of principal officer	G Gross r H(a) Is this a group retui		
	Appli	cation pending	The state of the s	H(b) Are all affiliates incl		Yes No
				If 'No,' attach a list	(see instruc	tions)
Ļ.		mpt status	2			
<u>J</u>	Webs			H(c) Group exemption n		
K		organization	Corporation Trust Association Other ► L Year of Formation	on MS	State of legal	domicile
Pa	rt	Summa		<u> </u>		
			be the organization's mission or most significant activitiesTo_Improv		<u>Mobili</u>	zing_the
9	_C	aring_F	ower of Our Community.			
ä	_					<del> </del>
Activities & Governance						
g		heck this bo		e than 25% of its n	et assets.   3	32
∞ರ			oting members of the governing body (Part VI, line 1a) dependent voting members of the governing body (Part VI, line 1b)		4	32
ë	1		of individuals employed in calendar year 2010 (Part V, line 2a)		5	5
Ξ	1		of volunteers (estimate if necessary)		6	175
Act			ed business revenue from Part VIII, column (C), line 12		7a	0.
			business taxable income from Form 990-T, line 34		7b	0.
		<u> </u>		Prior Year	<u> </u>	Current Year
	8 C	ontributions	and grants (Part VIII, line 1h)	2,593,1	34.	2,002,534.
e	A D		was revenue (Part VIII) line (2a)			
Revenue	10 In	vestment in	come (Part VIII, column (A), the 3 4 and 75	326,0	003.	170,863.
æ	11 0	ther revenu	e (Part VIII, column (A) lines 5, 6d, 8c, 9c, 10c, and line			
	12 To	otal revenue	e – add lines 8 through 🖟 😭 must egyal Rart VIII, (column (A), line 12)	2,919,1	137.	2,173,397.
	<b>13</b> G	rants and s	imilar amounts paid (Part TX) column (A), lines 1-3)	1,759,9	18.	1,467,309.
	14 B	enefits paid	to or for members (Part X) column (A), line 4)			
	<b>15</b> S	alaries, oth	er compensation, employee benefits (Part XI columb (A). Ines 5-10)	378,4	148.	383,140.
ses			fundraising fees (Part IX column (A), line 11e)	27,9	947.	26,336.
Expenses	1		sing expenses (Part IX, column (D), line 25) ► 256, 390.			
Ä	1		· · · · · · · · · · · · · · · · · · ·	158,1	64	149,880.
	1		ses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,324,4		2,026,665.
	1	•	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	594,6		146,732.
	<del>                                     </del>	evenue less	s expenses Subtract line 18 from line 12	<del></del>		End of Year
900	о т	-1-11-	(Dad V I.a. 16)	Beginning of Currer		4,429,249.
Base	20 T		(Part X, line 16) is (Part X, line 26)	62,3		60,555.
Net Assets or Fund Balancer	21 T					
			fund balances Subtract line 21 from line 20	4,221,9	702.	4,368,694.
-	art II		re Block		<del></del>	
Un	der penaltie nplete Dec	es of perjury, I distantion of prep	declare that I have examined this return, including accompanying schedules and statements, and to parer (other than office) is based on all information of which preparer has any knowledge	the best of my knowled	lge and belie	f it is true correct and
	<del>`</del> -					7 //
c.		Signati	to at atticer	Date	<u> </u>	<del>~</del> —
21	gn ere			President		
П	ere:		ie Bretzmann r print name and title	riesident		
		<del></del> _	preparer's name Preparer's synature Date		, PTI	N
		''	Emmeson 1	Check	<b>」"</b>	
	nid		W. Gustason, CPA   Ronald W. Gustason, CPA   6 21	self employ	eo PU	0103345
	eparer	- 1			<b>.</b>	C2000
US	se Only	Firm's addr			▶ 59-13	
			Naples, FL 34103-4438	Phone no		262-1040
Ma	v the IR	S discuss th	nis return with the preparer shown above? (see instructions)		l:	X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/21/10

Form	990 (2010) United Way of Coll	ier County, Inc.	59-1026096 Page 2
Par	t III Statement of Program Servi	ce Accomplishments	
	Check if Schedule O contains a resp	ponse to any question in this Part III	
1	Briefly describe the organization's mission		
	To Improve Lives by Mobili	zing the Caring Power of Our Commun	ity.
2	Did the organization undertake any significa	ant program services during the year which were not liste	ed on the prior
	Form 990 or 990-EZ?	F 3	Yes X No
	If 'Yes,' describe these new services on Sc	hedule O	
3	•	nake significant changes in how it conducts, any prograr	n services? Yes X No
•	If 'Yes,' describe these changes on Schedu		in services [ res [n] No
4	<del>-</del>	s for each of the organization's three largest program se	nuces by expenses. Section 501(c)(3)
4	and 501(c)(4) organizations and section 494 expenses, and revenue, if any, for each pro-	47(a)(1) trusts are required to report the amount of grant	s and allocations to others, the total
	(Code ) (Expenses \$ 1,	569, 580. including grants of \$	) (Revenue \$ )
74		ty, Inc. receives donations from th	
		various local United Way agencies a	
			s authorized by the
	Board of Directors.		
41	(Code ) (Expenses \$	including grants of \$	) (Revenue \$ )
-			
			<del></del>
			<b></b>
			<b></b>
40	(Code. ) (Expenses \$	including grants of \$	) (Revenue \$
	, (2010) ,, (2010) ,		
40	Other program services. (Describe in Sche	dule O.)	
		ncluding grants of \$ ) (Revenu	e \$ )
46	Total program service expenses ▶	1,569,580.	
BAA		TEEA0102L 10/06/10	Form <b>990</b> (2010)

			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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 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,' 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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b 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	11 b	Х	
•	c 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	11 c		Х
•	d 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	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	_	Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a 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, Parts I and IV	14b		Х
	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, Parts II and IV	15		Х
	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, Parts III and IV	16		Х
	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 (see instructions)	17	Х	
	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		Х
	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		X
	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Λ
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 Ь		

Form 990 (2010) United Way of Collier County, Inc.

Part IV | Checklist of Required Schedules (continued)

	tty Oncomist of Reduires Continues			
			Yes	No
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 19 If 'Yes,' complete Schedule I, Parts I and II	21	_X	
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 27 If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		_x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
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		
25 a	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		Х
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	-	Х
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		Х
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		Х
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)			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u> X</u>
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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		Х
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		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
ā	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2  Yes X 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		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		Х
BAA		Forn	990	(2010)

***	Check if Schedule O contains a response to any question in this Part V				Г
	Chock in Danage Controlled to the greatest fit that the t			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	2			
	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gain	mina			
Ū	(gambling) winnings to prize winners?		1 c	X	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	_			
	ments, filed for the calendar year ending with or within the year covered by this return	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	-	2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)				,,
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	-	3a		X_
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	L	3Ь		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority or	ver, a	4a		X
<b>.</b>	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u></u>	40		<u> </u>
D	If 'Yes,' enter the name of the foreign country  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
<b>.</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ŧ	5a		Х
		-	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	-	5c		
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	-	- 50		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organizat solicit any contributions that were not tax deductible?	ion	6a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts vinot tax deductible?	vere	6ъ		
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 goods and	Į.	7a		Х
_	services provided to the payor?  If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	-	7b		1.
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	to file	, <u>, , , , , , , , , , , , , , , , , , </u>		
C	Form 8282?		7с		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	L	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899		_		l
	as required?	-	7g		├
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	<del>-,-</del> ,	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	the s	8		Х
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		Х
ь	Did the organization make a distribution to a donor, donor advisor, or related person?		9Ь		X
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	o if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
t	Enter the amount of reserves the organization is required to maintain by the states in				
	which the organization is licensed to issue qualified health plans				
	Enter the amount of reserves on hand			ļ	1,,
	Did the organization receive any payments for indoor tanning services during the tax year?	- H	14a		X
b	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14b	L	<u></u>

	•			
Forr	n <b>990</b> (2010) United Way of Collier County, Inc. 59-102609	96	F	aqe 6
	rt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or constructions.	below	, and	
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	ction A. Governing Body and Management			
		<del> </del>	Yes	No
		32 32		
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		х
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		Х
4	Did the organization make any significant changes to its governing documents	4		Χ
	since the prior Form 990 was filed?			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6	_	Х
7	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Х
ı	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
i	a The governing body?	8a		X
(	b Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10	a Does the organization have local chapters, branches, or affiliates?	10a		X
-	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		
11:	a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	<u></u>
I	b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule C			·····
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	
1	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12Ь	Х	
•	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done  See Schedule O	12c	Х	
13		13		X
14	• • • • • • • • • • • • • • • • • • • •	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a	<u>X</u>	
ı	b Other officers of key employees of the organization	15b		<u>X</u>
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
	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?	16ь		
Sec	ction C. Disclosure			

1

17	List the states with which a copy of this Form 990 is required to be 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 X Upon request Own website Another's website

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

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

► Robin Jones 848 First Avenue North #240 Naples FL 34102 239-261-7112

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

Check if Schedule O contains a response to any question in this Part VII

 $\overline{\mathbf{X}}$ 

## 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.
- 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, if any. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization	nor any i	related	lorg	janiz	zatio	n con	nper	nsated any current offi	cer, director, or truste	e
(A)	(B)			((	<b>:</b> )			(D)	(E)	(F)
Name and title  See Schedule O	Average hours per week (describe hours for related organiza tions in Schedule O)	Individual trustee or director	institutional trustee		all Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Mike Dillon Chairman Elect	5							0.	0.	0.
(2) Jerri Kautsky Treasurer	5							0.	0.	0.
(3) Chuck Zundel Chairman	5							0.	0.	0.
(4) Ernie Bretzmann President	40				х			93,796.	0.	7,275.
_(5)										
	[									_
(8)										
_(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
										E 000 (0010)

1 dit VIII Section A. Officers, Directors, Trus		l l					, an				
(A)	(B)				c) 			(D)	(E)		(F)
Name and title	Average hours per week (describe			Officer				Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amour comp	imated nt of other iensation im the
	per week (describe hours for related organi zations in Sch O)	rector	nstitutional	Œ,	/ employee	est co loyee	ner	(11 21 1035 111100)	(11 21 1035 111105)	orga and	nization   related
	zations	truste	ał trustee		yee	mper	:			orgai	nizations
	Sch O)	e	tee			Highest compensated employee					
_(18)											
(20)											<del></del>
(21)											
(22)											
(23)				-							
(24)											
(25)											
(26)											
(27)											
(28)											
(29)											
1b Sub-total							•	93,796.	0.		7,275.
c Total from continuation sheets to Part VII, Section A	L						•	0.	0.		0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited	to those	اعدا م	had:	aho	<u>/e)</u>	who	rece	93,796.	0.	le compe	7,275.
from the organization • 0	10 11103	- 113				******		Elved more than p		- Compa	
3 Did the organization list any <b>former</b> officer, director			ey e	mpl	loye	e, oi	r hig	hest compensate	d employee		Yes No
on line 1a <sup>5</sup> If 'Yes,' complete Schedule J for such in  4 For any individual listed on line 1a, is the sum of rep	ortable	com	pen	satı	on a	and o	othe	r compensation fr	om	3	<u> </u>
the organization and related organizations greater the such individual						·				4	X_
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	ompensa omplete	Sch	troi	m ai ile J	ny L I for	suci	ated h pe	organization or in	ndividual	5	X
Section B. Independent Contractors  1 Complete this table for your five highest compensate	ed indep	end	ent	cont	rac	ors	that	received more that	an \$100,000 of		
compensation from the organization (A)								(B	<del>,                                    </del>	(C	`
Name and business addres	s							Description	of services	Comper	sation
***											
										_	
2 Total number of independent contractors (including	_	ımıte	ed to	the	ose	liste	d ab	ove) who received	d more than		
\$100,000 in compensation from the organization >	_0								<u></u>		

Pai	t VIII   Statement of Revenue		· · · · · · · · · · · · · · · · · · ·		
		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
UE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a 1,961,501.  b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f h Total. Add lines 1a-1f  Business Code	2,002,534.			
PROGRAM SERVICE REVENUE	2a				
	Investment income (including dividends, interest and other similar amounts)  Income from investment of tax-exempt bond proceeds  Royalties  (i) Real  (ii) Personal  b Less. rental expenses c Rental income or (loss)	156,006.			156,006.
	d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses  c Gain or (loss)  d Net gain or (loss)	14,857.	14,857.		
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less. direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  b  Business Code				
	b cd All other revenue e Total. Add lines 11a-11d  Total revenue. See instructions	2,173,397.	14,857.	0	. 156,006.
	12 TOTAL TOTALISM COS IIISM GOMENIS			<u> </u>	

Page 10

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 i	not include amounts reported on lines 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	1,467,309.	1,467,309.	general expenses	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			<del>/////////////////////////////////////</del>	<del>enteratio idil ocupu , ,</del>
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	93,796.	56,278.	0.	37,518.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	177,274.	18,165.	60,364.	98,745.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,554.	3,850.	3,102.	6,602.
0	Other employee benefits	77,653.	18,257.	22,522.	36,874.
9		20,863.	5,721.	4,657.	10,485.
10 11	Payroll taxes Fees for services (non-employees):	20,003.		1,001.	20, 100.
	a Management				
	-				
	b Legal c Accounting	10,928.		10,928.	
	Lobbying	20,520.		20/320.1	
	Professional fundraising services See Part IV, line 17	26,336.			26,336.
	Investment management fees	20,000.	· · · · · · · · · · · · · · · · · · ·	1111 1111	
	1 Other				
	Advertising and promotion				
13	Office expenses	10,966.		3,922.	7,044.
14	Information technology				
15	Royalties				
16	Occupancy	55,249.		55,249.	
17	Travel				
18					
19	Conferences, conventions, and meetings	2,500.		2,500.	
20	Interest				
21	•	2 222		2 202	- **-
22	Depreciation, depletion, and amortization	3,392.		3,392.	<del></del> _
23 24	Insurance. Other expenses litemize expenses not covered above (List miscellaneous expenses in line 24f if line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	2,799.		2,799.	
	a Printing and Publications	18,417.			18,417.
1	b Miscellaneous	15,796.	- //-	15,796.	
	c Campaign & volunteerism promot	12,746.			12,746.
	d_Computer_supplies_&_maintenanc	7,064.		7,064.	
4	e Telephone	6,999.		6,999.	1
	f All other expenses	3,024.		1,401.	1,623.
25	Total functional expenses Add lines 1 through 24f	2,026,665.	1,569,580.	200,695.	256,390.
26	Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form <b>990</b> (2010)

					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing			47,637.	1	76,921.
	2	Savings and temporary cash investments			1,086,829.	2	1,081,437.
	3	Pledges and grants receivable, net		754,399.	3	694,496.	
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part		5			
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contrisponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)		6			
ASSETS	7	Notes and loans receivable, net				7	
E	8	Inventories for sale or use				8	
T S	9	Prepaid expenses and deferred charges		ĺ	7,930.	9	15,683.
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10 a	34,797.	-		
	Ь	Less, accumulated depreciation	10 Ь	25,235.	12,954.	10 c	9,562.
	I	Investments - publicly traded securities			1,612,482.	11	1,548,211.
	ı	Investments — other securities See Part IV, line 11	706,578.	12	933,147.		
	13			13			
	14	Intangible assets		14			
	15	Other assets. See Part IV. line 11	55,549.	15	69,792.		
	16	Total assets Add lines 1 through 15 (must equal line	34)		4,284,358.	16	4,429,249.
	17	Accounts payable and accrued expenses	16,015.	17	6,899.		
	18	Grants payable		18			
	19	Deferred revenue				19	
Ļ	20	Tax-exempt bond liabilities			20		
À	21	Escrow or custodial account liability. Complete Part I	V of So	chedule D		21	
 	22	Payables to current and former officers, directors, true highest compensated employees, and disqualified per of Schedule L	stees, sons.	key employees, Complete Part II		22	
Ė	23		urd par	ties		23	
-	ŀ	Unsecured notes and loans payable to unrelated third	-	j.		24	
	25	Other liabilities Complete Part X of Schedule D			46,381.	25	53,656.
	26	Total liabilities. Add lines 17 through 25			62,396.	26	60,555.
N		Organizations that follow SFAS 117, check here ▶	X ar	nd complete lines			
Ë		27 through 29 and lines 33 and 34.	_				
AS	27	Unrestricted net assets			2,860,010.	27	3,138,171.
女のいましい	28	Temporarily restricted net assets		[	1,361,952.	28	1,230,523.
	29	Permanently restricted net assets		29			
R		Organizations that do not follow SFAS 117, check her	re ►	and complete			
		lines 30 through 34.			i		
FUZD	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipm	ent fur	nd		31	
ĩ	32	Retained earnings, endowment, accumulated income,	or oth	er funds		32	
BALAZOMO	33	Total net assets or fund balances.			4,221,962.	33	4,368,694.
Š	34	Total liabilities and net assets/fund balances			4,284,358.	34	4,429,249.

BAA

4,429,249. Form **990** (2010)

Forn	990 (2010) United Way of Collier County, Inc.	9-1026096	ı	Pa	ge <b>12</b>		
Pai	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>73,3</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,0	26,6	<u> 65.</u>		
3	Revenue less expenses Subtract line 2 from line 1	3		46,7 21,9			
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4						
5	5 Other changes in net assets or fund balances (explain in Schedule O) 5						
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4,3	68,6	594.		
Pai	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990.						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
ŧ	Were the organization's financial statements audited by an independent accountant?		2b	X			
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
Ć	I If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both.	sued on a					
	X Separate basis Consolidated basis Both consolidated and separate basis						
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ne Single	3a		X		
l	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits.	equired audit	3b				
BAA			Forn	n <b>990</b>	(2010)		

TEEA0112L 12/21/10

## **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.

Inspection

OMB No. 1545 0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

(C)

(D)

**(E)** 

Total

United Way of Collier County, Inc.

Employer identification number

59-1026096

Part | 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) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(bX1)(A)(iii). Enter the hospital's Δ name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ĸ X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 q investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 11 Type III - Other Type III - Functionally integrated Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons ofher than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11 g (i) A family member of a person described in (i) above? 11 g (ii) 11 g (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) h (vii) Amount of support (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the (v) Did you notify (vi) Is the (described on lines 1.9 above or IRC section (see instructions)) organization in column (i) listed in organization the organization in column (i) of organization in column (i) your governing document? Yes No Yes No Yes No (A) (B)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 United Way of Collier County, Inc. 59-1026096 Part II 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support								
Caler begir	ndar year (or fiscal year nning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010		<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants ')	2,042,714.	2,177,611.	2,190,834.	2,593,134.	2,002,53	34.	11,006,827.	
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					,		0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0.	
4	Total. Add lines 1 through 3	2,042,714.	2,177,611.	2,190,834.	2,593,134.	2,002,53	34.	11,006,827.	
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)							0.	
6	Public support. Subtract line 5 from line 4							11,006,827.	
Sec	Section B. Total Support								
Caleı begir	ndar year (or fiscal year nning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010		(f) Total	
7	Amounts from line 4	2,042,714.	2,177,611.	2,190,834.	2,593,134.	2,002,5	34.	11,006,827.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	111,488.	119,522.	101,695.	68,580.	57,94	47.	459,232.	
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)							0.	
11	Total support. Add lines 7 through 10					<del>[</del>		11,466,059.	
12	Gross receipts from related activ	rities, etc (see inst	ructions)			Ļ	12	0.	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(	(c)(3)	▶ □	
	tion C. Computation of Pu						,	<del></del>	
14	Public support percentage for 20			e 11, column (f))		-	14	96.0%	
15	Public support percentage from					Ļ	15	96.0%	
16 a	33-1/3% support test — 2010. If t and stop here. The organization	he organization di qualifies as a pub	d not check the b licly supported or	ox on line 13, and ganization	the line 14 is 33-	1/3% or more	e, che	ck this box	
b	33-1/3% support test — 2009. If t and stop here. The organization	he organization di qualifies as a pub	d not check a box licly supported or	on line 13 or 16a ganization	i, and line 15 is 33	3-1/3% or moi	re, ch	eck this box ►	
	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a s-and-circumstanc	ind-circumstances es' test. The orga	test, check this l nization qualifies	box and <b>stop here</b> as a publicly supp	e. Explain in F orted organiz	Part IN ation	/ how ►	
	or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	ind-circumstances test. The organiza	i' test, check this lation qualifies as a	box and <b>stop here</b> a publicly support	e. Explain in F ed organization	Part I\ on	/ how the ►	
18 BAA	Private foundation. If the organi	zation did not che	ck a box on line 1	З, 16a, 16b, 17a,				uctions	

# Schedule A (Form 990 or 990-EZ) 2010 United Way of Collier County, Inc. 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	<b>(f)</b> 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						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5 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						
	<b>Public support</b> (Subtract line 7c from line 6)						
	tion B. Total Support		·	-	<del></del>	· · · · · · · · · · · · · · · · · · ·	
Calen	dar year (or fiscal yr beginning in)►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	<b>(f)</b> Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	: Add lines 10a and 10b  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 Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	<b>▶</b> □
	tion C. Computation of Pu					<del></del>	
	Public support percentage for 20			e 13, column (f))		15	- <u>%</u>
	Public support percentage from 2					16	<u> </u>
	tion D. Computation of Inv			•			
17	Investment income percentage for				nn (f))	17	<u> </u>
18	Investment income percentage fr					18_	%
	33-1/3% support tests — 2010. If is not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies as	s a publicly suppor	ted organization	▶ 📋
t	33-1/3% support tests - 2009. If line 18 is not more than 33-1/3%	, check this box a	nd <b>stop here.</b> The	organization qua	lifies as a publicly	supported organiz	/3%, and ≥ ☐
20	Private foundation. If the organiz	ation did not che	ck a box on line 1				90 or 990 EZ) 2010

Schedule A	(Form 990 or 9	190-EZ) 2010	ט בווט ט	<u>eu way</u>	OI CO	orrier	County	(, Inc.		39-102	0090	Page 4
Part IV	Supplement Part II, line (See instru	i <b>tal Inform</b> 17a or 17 ctions).	nation. C 7b; and P	omplete art III, I	this pa ine 12.	art to pro Also co	ovide the mplete t	e explar this part	nations r for any	equired by additional	Part II, line information.	10;
<del>_</del> _												
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									<del>-</del>			

# SCHEDULE.D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

# **Supplemental Financial Statements**

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 Attach to Form 990.
 See separate instructions. OMB No 1545 0047

2010

Open to Public Inspection

Employer identification number

59-1026096 United Way of Collier County, Inc. 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Yes 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? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat 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 2a a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2d structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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.

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.

- b If the organization elected, as permitted under SFAS 116 (ASC 958), 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
  - (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 (ASC 958) relating to these items.
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

conservation easements

TEEA3301L 11/15/10

Schedule **D** (Form 990) 2010

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Schedule D (Form 990) 2010 Unite Part III Organizations Mainta							026096 <b>Assets</b> (	contir	Page 2 nued)
Using the organization's acquisition items (check all that apply)	on, accession,	and othe	er records, che	eck an	y of the following	that are a significant	use of its	collection	on
a Public exhibition			d 🗆 Loan	or exc	hange programs				
b Scholarly research			e Other		ago programo				
c Preservation for future general	ations		<b>□</b> □ ••.						
4 Provide a description of the organ Part XIV.		ctions an	d explain how	they	further the organi	zation's exempt purpo	ose in		
5 During the year, did the organizat assets to be sold to raise funds re	tion solicit or reather than to b	eceive do e mainta	nations of art ined as part o	, histo f the c	rical treasures, or organization's coll	other similar ection?	Yes	$\Box$	No_
Part IV Escrow and Custodia 9, or reported an amo	I Arrangem unt on Forn	<b>ents.</b> C n 990, I	Complete if Part X, line	orga 21.	nization answ	ered 'Yes' to For	m 990, F	³art IV _	/, line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian,	or other	ıntermediary	for co	ntributions or othe	er assets not	Yes	[	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and	d comple	te the following	ng tabl	е				
							Amour	it	
c Beginning balance						1 c			
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						1f			
2a Did the organization include an ai	mount on Form	990, Pa	rt X, line 21?				Yes		No
<b>b</b> If 'Yes,' explain the arrangement									
Part V Endowment Funds. Co	omplete if the	ne orga	<u>nızation ar</u>	iswei	red 'Yes' to Fo				
	(a) Current y	ear	(b) Prior yea	r	(c) Two years back	(d) Three years ba	ck (e)	Four year	s back
1 a Beginning of year balance									
<b>b</b> Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships								<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>	
<ul> <li>Other expenditures for facilities and programs</li> </ul>									
f Administrative expenses									
<b>g</b> End of year balance									
2 Provide the estimated percentage	e of the year er	nd baland	ce held as						
a Board designated or quasi-endow	vment ►		%						
<b>b</b> Permanent endowment ▶	<u></u> %								
c Term endowment ►	%								
3a Are there endowment funds not in organization by	n the possession	on of the	organization	that ai	e held and admin	istered for the		Yes	No
(i) unrelated organizations							3a(i)		<u> </u>
(ii) related organizations							3a(ii)		
<b>b</b> If 'Yes' to 3a(ii), are the related o	rganizations lis	ited as re	equired on Sci	hedule	R?		3b		<u> </u>
4 Describe in Part XIV the intended	duses of the or	ganızatı	on's endowme	nt fun	ds.				
Part VI Land, Buildings, and	Equipment	. See F	orm 990, F	art >	(, line 10.		<u>,                                      </u>		
Description of investment	(		or other basis estment)		Cost or other pasis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land	L				·		1		
<b>b</b> Buildings	L						_		
c Leasehold improvements	L								
<b>d</b> Equipment	<u> </u>				<u> </u>		-		
e Other					34,797.	25,235			<u>,562.</u>
Total. Add lines 1a through 1e (Column	n (d) must equa	al Form 9	990, Part X, co	olumn	(B), line 10(c).)		<u> </u>	9	<u>,562.</u>

BAA

Schedule **D** (Form 990) 2010

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	edule <b>D</b> (Form 990) 2010 United Way of Collier County, Inc.	59-102609	96 Page <b>4</b>
	t XI   Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
	Total revenue (Form 990, Part VIII,column (A), line 12)		2,173,397.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2,026,665.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		146,732.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		146,732.
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
	Total revenue, gains, and other support per audited financial statements	1	2,304,825.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
á	Net unrealized gains on investments 2a		
ŀ	Donated services and use of facilities 2b		
	: Recoveries of prior year grants		
	d Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	2,304,825.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) See Part XIV 4b -131,42	28.	
	Add lines 4a and 4b	4c	-131,428.
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,173,397.
	T XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Return	
	Total expenses and losses per audited financial statements	1	2,026,665.
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	a Donated services and use of facilities 2a		
	Prior year adjustments 2b	<b></b>	
	Other losses 2c		
	d Other (Describe in Part XIV.)		
	e Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	2,026,665.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
••	a Investments expenses not included on Form 990, Part VIII, line 7b		
_	O Other (Describe in Part XIV )		
	c Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,026,665.
Pa	rt XIV Supplemental Information		
Part	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 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 compladditional information	IV, lines 1b and ete this part to	d 2b, provide
		<del> </del>	
BAA	TEEA3304L 02/11/11	Schedule	<b>D</b> (Form 990) 2010

Schedule <b>D</b>	(Form 990) 2010	United Way o	of Collier Cour ontinued)	nty, Inc.		59-1026096	Page 5
Part XIV	Supplementa	I Information (c	ontinued)				
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<b>-</b> -						<del>-</del>	
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# SCHEDULE G (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545 0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service	or 19, or	it the organiz Attach to Forn	ation ente n 990 or Fo	red more ti orm 990-EZ	nan \$15,000 on Form 9: ′ ► See separate inst	ructions.	Inspection
Name of the organization					·,	Employer identifica	ation number
United Way of Co	ollier Cou	nty, Inc.				59-102609	6
Part   Fundraising Ac	tivities. Comple	te if the organ	ization and	swered 'Ye rt.	s' to Form 990, Part IV	, line 17	
1 Indicate whether the					wing activities. Check a	ill that apply	
a X Mail solicitations	5			e	Solicitation of non-	<del>-</del>	
b Internet and em				f	Solicitation of gove	<del>-</del>	
c Phone solicitation				g	Special fundraising	events	
d X In-person solicit  2a Did the organization employees listed in		or oral agreen VII) or entity i	nent with a n connecti	any individu on with pro	ial (including officers, d ifessional fundraising s	lirectors, trustees or key ervices?	X Yes No
<b>b</b> If 'Yes,' list the ten to compensated at lease	nighest paid ind st \$5,000 by the	ividuals or ent organization	ities (fundi	raisers) pur	suant to agreements u	nder which the fundrais	er is to be
(i) Name and address or entity (fundra	of individual	(ii) Activity		fundraiser dy or control	(iv) Gross receipts from activity	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)
or critity (tartate			of contr	ibutions?		fundraiser listed in column (i)	organization
			Yes	No		column (i)	<u></u>
4 6 6 3	T. 6. 6		103	110			
1 See Supplement Details	into for			Х		21,555.	
2							
3		······································					
4							
5			<del>                                     </del>				
6							
7							
8							
9							
10							
			<u> </u>	<u> </u>			_
Total	-1- 11		and an lease	<b>►</b>	ail contributions or bos	21, 555. been notified it is exem	0.
or licensing	cii ine organiza	lion is register	eu or neer	1560 (0 5011	cit continuations of has	been notined it is exen	ipt irom registration
<u>FL</u>					<del></del>		
						<del></del>	
				. <b>-</b>			

Par	t II	Fundraising Events. Complete if	f the organization a	answered 'Yes' to F	orm 990, Part IV,	line 18, or
		reported more than \$15,000 of fu	undraising event co	intributions and gro	ss income on For	m 990-EZ, lines 1
	·	and 6a. List events with gross re	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a)
Ŗ			(event type)	(event type)	(total number)	through column (c))
REVENUE	1	Gross receipts				
E	2	Less Charitable contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs			<del></del>	
	7	Food and beverages			· · · · · · · · · · · · · · · · · · ·	
X P E	8	Entertainment				
EXPESSES	9	Other direct expenses			<del> </del>	
J	10	Direct expense summary. Add lines 4- th Net income summary. Combine line 3, co			<b>•</b>	
Pai	11 t III		ation answered 'Y	es' to Form 990, Pa	art IV, line 19, or re	eported more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	'	Gross revenue				
F	2	Cash prizes				
D I RECT	3	Non-cash prizes				
R E E N C S T E	4	Rent/facility costs				
	5	Other direct expenses	]			
-		Volunteer labor	Yes %	Yes%	Yes %	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine I	ines 1, column (d) and	line 7		
	Ento	er the state(s) in which the organization op ne organization licensed to operate gaming lo,' explain	perates gaming activities gactivities in each of the	s ese states?		Yes No
		re any of the organization's gaming license 'es,' explain.				Yes No
BAA	<u></u>		TEEA3702L	01/13/11	Schedule <b>G</b> (Fo	orm 990 or 990-EZ) 2010

Schedule G (Form 990 or 990-EZ) 2010 United Way of Collier County, Inc.

59-1026096

Page 2

Schedule G (Form 9	90 or 990-EZ) 201	O United Way	of Collier Cou	nty, Inc.	59-102	6096	Page 3
11 Does the organ	nization operate g	aming activities with i	nonmembers?			Yes	No
12 Is the organiza administer chair	tion a grantor, be ritable gaming?	neficiary or trustee of	f a trust or a member o	f a partnership or othe	r entity formed to	Yes	No
13 Indicate the pe	rcentage of gamil	ng activity operated in	· 1		1 1		
a The organization		,			13a		%
<b>b</b> An outside faci	•				13b		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		the person who prepa	ares the organization's (	gaming/special events	books and records.		
Name ►						<b>-</b>	
Address ►							
<b>b</b> If 'Yes,' enter to of gaming reve	he amount of gar nue retained by t		ty from whom the organd by the organization ►			Yes	No
		· -					
Address ►							
16 Gaming manag	ger information						
Name ►					<del></del> -		
Gaming manag	ger compensation	<b>\$</b>					
Description of	services provided	<b></b>				<b>-</b> -	
Director/of	ficer	Employee	Indepe	endent contractor			
17 Mandatory dist	ributions						
state gaming li	cense <sup>9</sup>		charitable distributions			Yes	No
			e law to be distributed t	o other exempt organiz	zations or spent in t	he	
organization's	own exempt activ	ities during the tax ye	ear ► Ş	1 (1		D. 4.1. P.	- 01-
colun	nns (III) and (V	/), and Part III, III	te this part to prov nes 9, 9b, 10b, 15b iformation (see ins	o, 15c, 16, and 17t	ons required by b, as applicable	. Also cor	e 20, nplete
		er Additional Info					
See Supple	emental Inf	o for Details					
							<u></u>
					*		
							<del> </del>

1 1 1

# SCHEDULE I (Form 990)

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. Attatch to Form 990.

OMB No 1545 0047 2010 Open to Public Inspection

Department of the Treasury Internal Revenue Service		Complete II tile organizatio	dilizatori answereu Tes, to Form 330, Farriy, mes zi or zz. ► Attatch to Form 990.	riii 990, rait iv, iiiles 2. ).	<del>7</del>		Upen to Fublic Inspection
Name of the organization	1					Employer identification number	ation number
United Way of Collier County, Inc. Part   General Information on Grants and Assistance	V, Inc. ants and Assist	ance				159-1026096	10
Does the organization maintain records to substantiate the amount of the the selection criteria used to award the grants or assistance?	to substantiate the a	t of th	ne grants or assistance, the grantees' eligibility for the grants or assistance, and	itees' eligibility for the ç	rants or assistance, a	pu	X Yes No
Ω	rocedures for monito	oring the use of gran	nt funds in the United Sta	stes See Part	rt IV	. 7	V = 1 15
Fart II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered if set 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. Part II can be duplicated if additional space is needed.	ice to Governmi for any recipient additional space	ents and Organ that received relis is needed	Organizations in the United States. Complete if the organization answered if set to sived more than \$5,000. Check this box if no one recipient received more than \$5,00 ed	ted states. Compi Check this box if n	ete if the organiz o one recipient re	ation answered	Yes to in \$5,000. ▶ □
1 (a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
(1) See Attachment				7 B - 1 G -			
			1,459,180.	0.			
				,			
(3)	:						
							· · · · · ·
· · · · · · · · · · · · · · · · · · ·							
(5)							
<u></u> <u></u> <u></u> <u></u> <u></u>							
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<i>©</i>							
<u></u>							
l	and government orc	yanızatıons				<b>A</b> 4	30
3 Enter total number of other organizations	SU						
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions	for Form 990.		TEEA3901L 10/29/10	10/29/10	Schec	Schedule I (Form 990) 2010

Page 2 (Form 990) 2010 United Way of Collier County, Inc.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, Inne 22. Part III can be duplicated if additional space is needed. (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. 59-1026096 (e) Method of valuation (book, FMV, appraisal other) \_additionally meet\_with\_the\_agency at least\_once\_a year\_for\_a detailed interview \_ monitoring agencies, including required audited fiancial statements. They \_\_United Way\_of\_Collier\_County, Inc. has a specific committee dedicated to (d) Amount of non cash assistance \_ Part I, Line 2. Procedures for Monitoring Use of Grants Funds in U.S. (c) Amount of cash grant \_ process in order to continue agency status. (b) Number of recipients (a) Type of grant or assistance Schedule 1 (Form 990) 2010 Part III S ဖ 7 m 4

BAA

Schedule I (Form 990) 2010

# SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Un	ited Way of Collier County, Inc.	59-1026096
	Form 990, Part VI, Line 11b - Form 990 Review Process	
	The Form 990 is furnished to the Treasurer of United Way to sta	rt the review
	process. Once the Treasurer reviews the return it is discussed	with the Executive
	Director, whom also serves on the Board as President and Secret	ary. They together
	_approve_the_final_Form_990_for_submission	
	Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co	nflicts
	Upon or before election, hiring or appointment, it is required	that individuals read
<del>-</del> -	and sign a conflict of interest and ethics policy. This policy	includes the
<del></del> _	disclosure of all conflict of interest, or possible conflict of	_interested_parties
	It is a requisite that the policy also be updated as needed. Th	ese_disclosures_are
	all noted and the individuals with a conflict of interest are n	ot_permitted_to_vote
	on any issue relating to the parties of conflict.	
	Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
	No documents available to the public.	
	Form 990, Part VII - Compensation Explanation	
	Ernie Bretzmann	
	The amount reported in column F within Part VII Section A for \$	7,275, is deferred
	compensation for 2010 under a plan, not currently paid or taxab	le.

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department o	of the Treasury enue Service	► File a sep	arate applic	cation for each return.		
• If you	are filing for an A	Automatic 3-Month Extension, com	plete only P	art I and check this box.		<b>►</b>  X
• If you	are filing for an A	dditional (Not Automatic) 3-Month	Extension,	complete only Part II (on page 2 of this for	orm)	_
Do not co	mplete Part II uni	ess you have already been granted	l an automa	tic 3-month extension on a previously file	d Form 8868.	
corporation request and Associate electronic	on required to file in extension of time d With Certain Pe filing of this form	Form 990-T), or an additional (not le to file any of the forms listed in Firsonal Benefit Contracts, which multiply visit www.irs.gov/efile and click of	automatic) 3 Part I or Par ust be sent t n <i>e-file for C</i>		onically file Form 8t mation Return for T	868 to ransfers
				nit original (no copies needed).		
•	•	•		month extension — check this box and co		
All other o		ıdıng 1120-C filers), partnerships, F	REMICS, an	d trusts must use Form 7004 to request a	n extension of time	to file
	Name of exempt	organization			Employer identification r	number
Type or						
print		ay of Collier County,			59-1026096	
File by the due date for	Number street, a	and room or suite number. If a P.O. box, see i	nstructions			
filirig your return See		t Avenue North #240	<u> </u>	4.4.4.4		
instructions	City town or pos	t office state and ZIP code. For a foreign add	dress see instri	uctions		
	Naples,	FL 34102				
Enter the Application		he return that this application is for	(file a sepa	Application  Application Is For		01 Return Code
	****					07
Form 990			01	Form 990-T (corporation) Form 1041-A	L.J. 39 WW	08
Form 990			03	Form 4720		09
Form 990			03	Form 5227		10
Form 990	-T (section 401(a)	or 408(a) trust	05	Form 6069		11
			06	Form 8870		12
Form 990	-T (trust other tha	ii above)	1 00	1 0/M 00/0		
Teleph If the If this check the ex	organization does is for a Group Re this box ►  ctension is for quest an automat	If it is for part of the group, check ic 3-month (6 months for a corpora	digit Group  this box	United States, check this box	this is for the whole nd EINs of all memb	5 ,
The	extension is for	he organization's return for. r 20 10 or nning, 20				
2 If th		d in line 1 is for less than 12 month			al return	

**b** If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax 3Ы\$ payments made. Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011)

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2010

# **Federal Supplemental Information**

Page 1

United Way of Collier County, Inc.

59-1026096

Explanation for Schedule G Part 1 Question 2:

Per requirements of the United Way of America, the membership dues paid are to be included on line 16 on page 1 of Form 990. There were no gross receipts related to fundraising but only contributions received for the 2010 United Way campaign, which were included on line 8 on page 1 of Form 990. Total dues made to the United Way of America in 2010 were \$21,555 and total dues paid to the United Way of Florida in 2010 were \$4,781.

# SCHEDULES OF GRANTS PAID SCHEDULE I ATTACHMENT For Year Ended 12/31/10

Agency Names	Agency Address	Agency EIN	IRC Code	Amount Pd	Purpose of Allocation
4H Club Foundation	14700 Immokalee Rd, Naples FL	59-1882892	501(c)(3)	\$ 30.000	Help Fund Operations
American Red Cross	2610 Northbrooke Plaza Dr, Naples FL	59-1420958	501(c)(3)	50,000	Help Fund Operations
Boy Scouts of America	1801 Boy Scout Drive, Ft Myers FL	59-1150488	501(c)(3)	60,000	Help Fund Operations
Care Club of Collier County	1800 Santa Barbara Blvd , Naples FL	65-0253054	501(c)(3)	15,000	Help Fund Operations
Catholic Social Services	2210 Santa Barbara Blvd , Naples FL	59-2473176	501(c)(3)	130,000	Help Fund Operations
Children's Advocacy Center	1036 6th Ave. Naples FL	65-0049492	501(c)(3)	95,000	Help Fund Operations
Children's Home Society	1940 Maravilla Ave , Ft Myers FL	59-0192430	501(c)(3)	17,000	Help Fund Operations
Collier Child Care Resources	269 Airport Rd, Naples FL	59-6198583	501(c)(3)	40,000	Help Fund Operations
Fun Time Nursery	102 12th St, Naples FL	59-1039978	501(c)(3)	90,000	Help Fund Operations
Grace Place	4300 21st Ave . Naples FL	65-1229558	501(c)(3)	40,000	Help Fund Operations
Gulf Coast Girl Scout Council	12651 Girl Scout Lane, Ft Myers FL	59-0760212	501(c)(3)	42,500	Help Fund Operations
Harry Chapin Food Bank	3760 Fowler St, Ft Myers FL	59-2332120	501(c)(3)	41,580	Help Fund Operations
Hunger & Homeless Coalition	1044 6th Ave., Naples FL	04-3610154	501(c)(3)	39,000	Help Fund Operations
Immokalee Child Care Center	3775 Airport Rd N, Naples FL	59-1209842	501(c)(3)	95,000	Help Fund Operations
Legal Aid Society	4125 E Tamiami Trail, Naples FL	65-0807648	501(c)(3)	50,000	Help Fund Operations
Naples Alliance for Children	660 9th St, Naples FL	59-2770492	501(c)(3)	20,000	Help Fund Operations
Naples Equestrian Center	206 Ridge Dr. Naples FL	65-0793008	501(c)(3)	15,000	Help Fund Operations
National Alliance for the Mentally III	5020 Tamiami Trail, Naples FL	65-0047747	501(c)(3)	60,000	Help Fund Operations
Neighborhood Health Clinic	120 Goodlette Rd, Naples FL	59-3546884	501(c)(3)	70,000	Help Fund Operations
Project Help	843 Myrtle Terrace, Naples FL	59-2655969	501(c)(3)	85.000	Help Fund Operations
Redlands Christian Migrant Assoc	402 West Main St. Immokalee FL	59-1221966	501(c)(3)	65,000	Help Fund Operations
Shelter for Abused Women	PO Box 10102, Naples FL	59-2752895	501(c)(3)	110.000	Help Fund Operations
Sunrise of Collier County	3984 Arnold Ave, Naples FL	59-1564538	501(c)(3)	75,000	Help Fund Operations
Voices for Kids	13180 N Cleveland Ave. Ft Myers FL	59-2296529	501(c)(3)	30.100	Help Fund Operations
Y M C A of Marco Island	PO Box 2529, Marco Island FL	59-2498619	501(c)(3)	60,000	Help Fund Operations
Youth Haven	5867 Whitaker Road, Naples FL	23-7065187	501(c)(3)	34.000	Help Fund Operations
	Total Allocations Paid to Agence	nes of \$5,000 or	More	\$ 1,459,180	

2010

# Schedule D, Part XIV - Supplemental Information

Page 6

United Way of Collier County, Inc.

59-1026096

Schedule D, Part XII, Line 4b Other Revenue Included On Form 990 But Not Included In F/S

Decrease in temporarily restricted asset

Total  $\frac{\$}{\$}$   $\frac{-131,428}{-131,428}$ .

03/09/2011

J5029 L851

UNITED WAY OF COLLIER CNTY ENDW 20 Schedule D Detail of Short-term Capital Gains and Losses

52-7091604

		Date	Date	Gross Sales	Cost or Other	Short-term
	Description	Acquired	Sold	Price	Basis	Gaın/Loss
	25.	10/08/2009	02/08/2010	731.24	853.16	-121.92
	Γτı					
	CORP	06/15/2009	02/08/2010	3,362.51	3,586.25	-223.74
	75. BANK OF NEW YORK MELLON					
	CORP COM	03/13/2009	02/08/2010	2,017.50	1,785.00	232.50
		03/13/2009	02/08/2010	282.4	254.1	28.3
	. CELGENE COR	12/09/2009	02/08/2010	4.7	.99	8.2
	. CHESAPEAKE ENERGY CORP	06/15/2009	/08/2	3,762.67	3,564.58	١.
	. CHESAPEAKE E	3/13/2	/08/2	, 2	٠.	410.27
	. CUMMINS I	0/26/200	/08/20	754.19	730.97	23.
	O. EMC CORP CC	09/04/2009	02/08/2010	10,632.94	١.	[.
	. EATON CORP COM		02/08/2010	١ ٦	,644.	151.83
	INC COM CL	/04/2	02/08/2010	1,607.89	-	m
	. GOOGLE I	04/30/2009	2/08/	,751.7	9.3	l
	2	04/30/2009	02/08/2010	716.84	557.	59.
	155. INTERNATIONAL GAME					
		09/04/2009	02/08/2010	2,731.30	3,195.87	-464.57
	125. MICROSOFT CORP COM	06/12/5009	2/08/201	,466.7	,895.	71.
	- 1	03/13/2009	02/08/2010	2,773.38	, 67	<b> </b> თ
	95. PEABODY ENERGY CORP COM	06/15/2009	02/08/2010	,858.3	3,151.47	8.9
	140. PHILIP MORRIS INTERNATIONA					
	L INC COM	09/04/2009	02/08/2010	6,394.98	6,414.93	-19.95
	. T ROWE PRICE GROUP INC	11/11/2009	/80/		3.4	0
	. T ROWE PRICE GROU	/30/200	02/08/2010	2,174.07		374.43
	5. HENRY SCHEIN INC	9/04/200	2/08/	4,048.46	4,020.80	27.66
	. HENRY SCHEIN INC	0/200	2/08/201	809.69	622.11	187.58
	5. SCHLUMBERGER LTD COM	11/11/2009	01	12.1	m	-18.46
	N SEMI					
	CO SPONS ADR	09/04/2009	02/08/2010	3,994.12	4,467.85	-473.73
	150. TAIWAN SEMICONDUCTOR MFG					
	CO SPONS ADR	/13/	02/08/2010	1,443.66	1,347.00	96.66
	. TELEFONICA S A SPO	/13/	02/08/2010	5,453.65	4,590.40	863.25
	. TRAVELERS COS	10/26/2009	02/08/2010	, 12	7,476.20	46.3
	. TRAVELERS COS INC CO	/04/	02/08/2010	6,883.95	7,011.20	-127.25
	30. UNITED TECHNOLOGIES CORP	09/04/2009	02/08/2010	-	1,793,40	173.21
Totals						

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# UNITED AY OF COLLIER CNTY ENDW 20 Schedule U Detail of Short-term Capital Gains and Losses

		Date	Date	Gross Sales	Cost or Other	Short-term
	Description	Acquired	Sold	Price	Basis	Gain/Loss
	15. BURLINGTON NORTHERN SANTA					
	FE	00	02/16/2010	10	849.75	650.25
	. ADOBE	/08/2	/18/2	332.7	1.7	111.0
	. AVON PRODS INC	/200	2/18/20	09.3	41.2	1.9
		01	2/18/	24.	13.1	
	10. HEWLETT PACKARD CO COM	04/30/2009	02/18/2010	8.3	1	
	10. INTERNATIONAL GAME					
	TE	09/04/2009	02/18/2010	177.50	206.19	-28.69
	. KBR INC COM	10/08/2009	02/18/2010	9	0	4.
	. ORACLE CORP COM	02/08/2010	02/18/2010	4.	31.9	
	LEFONICA S A SPONS AD	/13/200	02/18/2010	ω	82.1	١.
	. XL CAPITAL LTD FGN	/08/201	02/18/2010	3.4	165.8	17.
	. EOG RESOURCES INC C	/08/201	02/26/2010	,665.9	,601.	64.44
	- 1	09/04/2009	05/06/2010	,135.7	,267.	
	QUALCOMM INC CC	02/08/2010	05/14/2010		7	77.51
	NOBLE CORP	11/11/2009	05/27/2010	,684.0	,401.	-717.43
	NOBLE CORP FGN	2/26/201	1/	3.1	211.4	ω,
	. NOBLE CORP	02/08/2010	05/27/2010	3.1	95.	2
	- 1	9/04/2	1	📑	6.0	, m
	5. ADOBE SYS INC	/26/20	07/23/2010	3	172.9	~
	5. ADOBE SYS INC	2/08/201	7/23/		482.55	
	. ADOBE SYS INC C	9/04/200	07/23/2010	75.7	7	-57.41
	. AMAZON COM I	/08/	07/23/2010	,14	,170.9	1.
	더미	2/26/201	7/23/	02.2		7.
	. APPLE INC COM	9/04/200	7/23/	,290.	836.1	ഥ
	. AVON PRODS INC COM	/08/200	7/23/2	,742.3	,047.5	
	. BANK OF AMERICA COR	4/09/2	7/23/2	,425.8	<u>ن</u>	-551.10
	NOVA	0/08/200	7/23/2	,157.2	,024.	132.55
	. CELGENE CORP COM	2/09/2	7/23/	1,296.21		-36.13
	0. COLGATE PALM	2/08/201	7/23/	28.7	793.60	35.10
	INC COM	6/2		2,685.85	1,705.59	980.26
	5. WALT DISNEY	2/26/	07/23/2010	167.90	157.20	10.70
	0. EATON CORP	09/21/2009	07/23/2010	2,293.77	2	530.97
•	. EXPEDITORS	02/08/2010	07/23/2010	1,432.87	.3	[-
	5. FEDEX CORP COM	02/26/2010	07/23/2010	388,61	417.65	-29.04
Totals	,					

STATEMENT

20-102520610440

03/09/2011

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UNITED WAY OF COLLIER CNTY ENDW 20 Schedule D Detail of Short-term Capital Gains and Losses

Description	Date	Date	Gross Sales Price	Cost or Other	Short-term Gain/Loss
5. FEDEX CORP COM	02/18/2010	07/23/2010	388.60	400.35	-11.75
١.	02/18/2010	3/201	. 1		0
			4		
GOLD COM	10/26/2009	07/23/2010	1,054.20	1,200.75	-146.55
. GENERAL	/26/201	3/2		160.3	-5.68
. GENERAL ELEC CO	02/08/2010	07/23/2010	2,551.16	2,583.24	-32.08
5. HEWLETT PACKARD CO COM	02/26/2010	07/23/2010	229.3	254.55	7
10. INTERCONTINENTALEXCHANGE				,	
INC COM	02/08/2010	07/23/2010	1,070.19	974.95	95.24
470. INTERNATIONAL GAME					
TECHNOLOGY COM	09/04/2009	07/23/2010	7,413.33	69.069,6	-2,277.36
5. INTERNATIONAL GAME					
TECHNOTOGY COM	04/09/2010	07/23/2010	78.87	99.85	-20.98
5. INTERNATIONAL GAME					
TECHNOTOGY COM	02/26/2010	01/23/2010	78.86	87.55	-8.69
70. KBR INC COM	05/14/2010	07/23/2010	1,583.38	1,601.60	-18.22
30. OCCIDENTAL PETE CORP DEL	05/06/2010	07/23/2010	$\sim$	2,465.00	-37.12
10. ORACLE CORP COM	04/09/2010	07/23/2010	241.90	258.20	-16.30
115. ORACLE CORP COM	02/08/2010	07/23/2010	2,781.79	,667.	114.40
40. SCHLUMBERGER LID COM	1/	07/23/2010	٦	2,644.89	-308.96
	05/27/2010	07/23/2010	583.98		-10.93
	02/08/2010	07/23/2010	4,896.50	5,781.98	-885.48
25. TEVA PHARMACEUTICAL INDS					
LTD S	02/08/2010	07/23/2010	1,220.47	1,424.25	-203.78
10. THERMO FISHER SCIENTIFIC					
INC COM	02/08/2010	07/23/2010	506.39	469.40	36.99
D TECHNOLOGIES C	/04/	07/23/2010	351.64	298.90	52.74
. URBAN OUTFITI	2/09/2	$\sim$	10.	955.77	54.60
INC	/08/201	07/23/2010	377.37	17.5	-40.18
. VISA INC COM CL A	09/04/2009	07/23/2010	32.0	,063.	68.14
. VMWARE INC COM	05/14/2010	07/23/2010	<u>ن</u>	1,227.60	303.37
. ZIONS BANCORP COM	4/09/20	$\dashv$	1,205.97	1,449.28	-243.31
. XL GROUP PLC FGN	02/26/2010	07/23/2010	174.50	183.40	-8.90
XL GROUP PLC FG	02/08/2010	07/23/2010	1,570.47	1,492.20	78.27
20. NOBLE CORP FGN COM	09/04/2009	07/23/2010	624.49	690.30	-65.81
Totals					

# UNITED AY OF COLLIER CNTY ENDW 20 Schedule U Detail of Short-term Capital Gains and Losses

	Description	Date	Date	Gross Sales Price	Cost or Other Basis	Short-term Gain/Loss
322	4.502					
	REALRET	11/27/2009	07/27/2010	26,872.03	30,000.00	-3,127.97
115,	4.493 PIMCO COMMODITY					
	REALRETURN	1/24/2	07/27/2010	8,727.97	9,628.47	-900.50
7	. COVANCE INC COM	02/08/2010	08/12/2010		88	-1,053.69
	. CVS/CAREMAR	02/08/2010	09/10/2010		163.9	9.1
Ī	COM	2/08/2	10/08/2010	15.9	9	559.48
	. APACHE CORP COM	02/26/2010	10/08/2010	, 506.	3.5	4
4	. AVON PRODS INC C	0/08/2	/80/0	,293.1	,365.0	;
8	. BANK OF AMERICA CORP	4/09/201	8/201	,063.	,506.2	7
30	. BANK OF NOVA	10/08/2009	10/08/2010	0.6	8.	69.2
20	. CELGENE	08/12/2010	10/08/2010	1,151.38	,128.	22.7
25	. CUMMINS	0/26/	10/08/2010	,305.2	18.2	9
Ţ	. DEERE &		10/08/2010	1,121.38	7	53.46
		3/2	10/08/2010	896.6	04.4	7.7
2	. DIRECTV COM CL A	3/	10/08/2010	45.7	٣.	124.34
2	. EXPEDI	02/08/2010	10/08/2010		25.9	42.
	Ή.	02/18/2010	10/08/2010	1,304.22	01.0	10
2(	. FS NETWORKS INC C	02/18/2010	10/08/2010	1,834.96	95.1	39.8
	5. FREEPORT-MCMORAN COPPER &					
		10/26/2009	10/08/2010	1,406.97	1,200.75	206.22
140	_	02/08/2010	10/08/2010	,389.		6.7
1(	O. INTERCONTINENTALEXCHANGE					
	INC COM	02/08/2010	10/08/2010	1,111.08	974.94	136.14
2(	. KBR INC	5/14/2	10/08/2010	503.59		45.
35	. KBR INC COM	0/08/20	/80/	81.	783.73	7.
20	METLIFE INC COM	9/10/20	/	$\infty$	808.16	-23.78
	. NEXTERA ENERGY I	7/23/20	10/08/2010	7	787.21	35.52
2.	. OCCIDENTAL P	/06/20	10/08/2010	2,063.46	2,054.16	9.30
96	E CORP COM	2/08/	10/08/2010	2,618.15	-	414.65
2	. HENRY SCHEIN INC	08/12/2010	10/08/2010	,460.4	1,350.75	109.72
3(	. SCHLUMBERGER LT	05/27/2010	10/08/2010	1,893.87	1,784.71	109.16
1	RJMCO	07/23/2010	10/08/2010	926.23	935.86	-9.63
2(	$\cap$					1 1
	INC COM	02/08/2010	10/08/2010	953.18	938.80	14.38
Totals						



20-102520610440

03/09/2011

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STATEMENT

03/09/2011

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UNITED WAY OF COLLIER CNTY ENDW 20 Schedule D Detail of Short-term Capital Gains and Losses

52-7091604

	Date	Date	Gross Sales	Cost or Other	Short-term
Description	-1	Sold	Price	Basis	Gain/Loss
20. URBAN OUTFITTERS INC COM	12/09/2009	10/08/2010		637.18	-8.20
20. VMWARE INC COM CL A	05/14/2010	10/08/2010	1,529.77	١ -	١.
50. ZIONS BANCORP COM	04/09/2010	10/08/2010	٠.	1,207.74	-117.26
	02/08/2010	10/08/2010	١ -	5	
50000. FREDDIE MAC MED TERM NT					
STEP UP	04/30/2010	11/19/2010	50,000.00	50,000.00	
645. BANK OF AMERICA CORP COM	04/09/2010	12/02/2010	,514.	2,144.	-4,630.13
. GENERAL ELEC CO COM	02/08/2010	/16/	9,580.25	,454.	١ ٠
235. QUANTA SERVICES INC COM	/80/	12/16/2010	,648.		567.96
10. CISCO SYS INC COM	/26/	/22/	195.	244.	١.
40. CISCO SYS INC COM	/08/	/22/	779.99		-166.01
. F5 NE	_	/22/		1,916.51	
			,		
					İ
					!
Totáls			335,188.00	332,285.00	2,903.00
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UNITEE AY OF COLLIER CNTY ENDW 20 Schedule D Detail of Long-term Capital Gains and Losses

	Decoriation	Date	Date	Gross Sales	Cost or Other	Long-term
	TOTAL DOOD	Acquired	DIOC	rrice	Basis	Gain/Loss
15% RATE	CAPITAL GAINS (LOSSES)					
	י משטוומטממ מדג					
	SU. AIR FRODUCIS & CHEMICALS INC COM	000/10/1	00/00/0	L		
	225 BANK OF NFW YORK MELLON	02/04/2006	0707/80/70	2,055.28	2,057.70	-2.42
	אלט מסטי	000/10/0	700/00/0	1	,	
	15 BANK OF NEW YORK MELLON	8002/50/21	0707/80/70	6,052.52	6,746.89	-694.37
	CORP COM	01/14/2009	02/08/2010	403 50	35 25	77 77
	55. BHP BILLITON LTD SPONS ADR	1/30/200	2/08/201	) α	2 C	ν α
	O. CHESAPEAKE ENERGY CORP	$\frac{1}{14}$	2/08/201	971	621.2	r α ο σ
	. CHESAPEAKE ENERGY CORP	12/05/2008	2/08/201	• •	1 00	0
	. WALT DISNEY CO COM	!~~	2/08/2	0	4	1
	55. INTEL CORP COM	$\sim$	02/08/2010	1,065.89	474.0	0.0
		7/60/	02/08/2010	4.	54.	.  •
	5. MICROSOFT CORP	9/19/	02/08/2010	6.7	401	65.4
	0. MICROSOFT	08/29/2006	02/08/2010	4.6	514.8	@
	. MICROSOF	01/14/2009	02/08/2010	93.3	79.	4.3
	20. PEABODY ENERGY CORP COM	07/11/2008	02/08/2010	2.2	32.8	20.5
	402. TAIWAN SEMICONDUCTOR MFG					
	CO SE	06/22/2007	02/08/2010	3,869.00	4,369.15	-500.15
	40. TAIWAN SEMICONDUCTOR MFG					
	CO SPONS ADR	04/04/2008	02/08/2010	384.97	423.20	-38.23
	150. TAIWAN SEMICONDUCTOR MFG					
	CO SPONS ADR	01/30/2008	02/08/2010	1,443.66	1,377.00	66.66
	67. TAIWAN SEMICONDUCTOR MFG					
	CO SPONS ADR	4/2	02/08/2010	644.83	498.48	146.35
	. UNITED TECHNOLOGIES	08/29/2006	02/08/2010	3,605.44	3,379.75	225.69
	40. BURLINGTON NORTHERN SANTA					
	FE COM	08/06/2008	02/16/2010	4,000.00	4,037.37	-37.37
	. CVS/CAREMARK C	06/05/2008	02/18/2010	341.60	435.	١.
	. CISCO SYS INC C	06/05/2008	/18/2	242.50		-32.60
	. WALT DISNEY		/18/2	09.	5	١.
•	O. INTEL CORP COM	/03/	02/18/2010	207.90	268.00	-60.10
	10. JP MORGAN CHASE & CO COM	05/09/2008	02/18/2010	04.	461.87	-57.58
Totals						

JSA 0F0970 2 000 20-102520610440

03/09/2011

KD5029 L851

03/09/2011

J5029 L851

UNITED WAY OF COLLIER CNTY ENDW 20 Schedule D Detail of Long-term Capital Gains and Losses

52-7091604

		Date	Date	Gross Sales	Cost or Other	Long-term
	Description	Acquired	Sold	Price	Basis	Gain/Loss
10	. SCHWAB CHARLES CORP NEW	04/09/2007	02/18/2010	178.30	193.10	-14.80
100	. TELEFONICA	8/29/20	2/1	∞	27.0	ω.
10	. NOBLE CORP FGN	9/10/200	2/18/	7	491.	-65.7
30	. EOG RESOURCES INC COM	06/15/2007	02/26/2010	2,799.57	2,417.12	4.
50000	. COCA					
	NOTE	02/12/2007	04/06/2010	50,711.00	48,463.00	2,248.00
30	. BAXTER INTERNATIONAL INC	/13/2	04/09/2010	1,731.72	4	207.12
105		1/16/2	04/09/2010	6,061.00	5,002.20	1,058.80
115	. CVS/CAREMARK CORP COM	5/09/2	04/09/2010	,192.9	-	-547.44
340	. SCHWAB CHARLES CORP NEW	/09/2	04/09/2010	,496.5	,565.4	-68.92
120	. TRANSOCEAN LTD FGN	3/1	/06/20	8,542.89	6,818.40	,724.4
80	. TRANSOCEAN LTD FGN COM	12/05/2008	05/06/2010	,695.2	~	7
50000	. ABBOTT LABORATORI	/2	/12/	,875.	,874.0	3,001.00
50000	. AM					
	CORP MED TERM NT	/05/2	5/15/	50,000.00	,062.0	938.00
75	. NOBLE CORP	09/10/2007	05/27/2010	6.4	3,689.85	-1,393.38
20.		0/2	/21/	612.39	. 2	-297.81
15						
	INC COM	05/04/2006	07/23/2010	1,070.83	1,028.85	41.98
10	. APPLE INC COM	4/04/200	П	,581.4	,545.8	5.6
20	. BHP	1/30/200	07/23/2010	41	,333.	
185	CVS/CI	05/09/2008	07/23/2010	88.6	,625.8	-1,937.18
115	. CISCO SYS INC COM	6/05/2	01	,655.	9	-508.33
10	. COLGATE PALM	1/30/200	07/23/2010	828.	747.2	81.
40	. COVANCE INC COM	7	07/23/2010	9	l •l	-1,075.05
5	. WALT DISNEY CO	/08/2	/23/2			5.32
20	. WALT DISNEY CO	/04/2	H		- 1	2
20	. WALT DISNEY CO	06/05/2006	$\neg$		609.21	62.37
20	. EOG RESOURCE	06/15/2007	$\neg$	2	4.	410.95
10	. EXXON M	1/0	/23/201	•	9	-146.70
3	. GOOGLE INC COM CL	04/30/2009	/23/	4.	,199.7	254.50
10	. GOOGLE INC COM CL	03/13/2009	/23/201	,847.	54.9	
. 2		12/05/2008	07/23/2010	969.49	561.78	407.71
50	. HEWLET	$\circ$	07/23/2010	92.	4	435.34
50	. INTEL CORP COM	12/03/2007	07/23/2010	1,068.98	1,340.00	-271.02
Totals						

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UNITED AY OF COLLIER CNTY ENDW 20 Schedule D Detail of Long-term Capital Gains and Losses

		Date	Date	Gross Sales	Cost or Other	Long-term
	Description	Acquired	Sold	Price	Basis	Gain/Loss
	. INTEL CORP	04/04/2008	07/23/2010	855.19	885.20	-30.01
	15. JP MORGAN CHASE & CO COM	05/09/2008	07/23/2010	1.2	92.8	-101.52
	. JP MORGAN CHAS	08/06/2008	07/23/2010	79.6	7	47
	. MEDTRONIC	06/05/2008	07/23/2010	7.	1,803.88	20.
	. MEDTRONIC INC C	00	07/23/2010	366.80	506.10	-139.30
	PEABODY ENERGY CORP	6/15/2	3/201	7	6.9	59.
	. T ROWE PRICE GROUP I	0/200	07/23/2010	1,195.48	999.8	95.6
	. OUANTA	06/15/2009	07/23/2010	981.4	55.	74.
	. HENRY SCHEIN INC CON	04/30/2009	07/23/2010	,303.9	ω	67.1
	SCHWAB CHARLES	04/09/2007	07/23/2010	36.5	,379.2	42.7
	SCHWAB CHARLES CORP	04/30/2009	07/23/2010	,129.	ω	-259.42
	7	03/13/2009	01/23/2010	1,883.27	1,726.25	N)
	TEVA PHARMACEUT					
	LTD SPONS AD	10/09/2007	01/23/2010	1,220.46	1,105.00	115.46
	15. THERMO FISHER SCIENTIFIC					
	INC COM	06/14/2007	07/23/2010	759.59	796.92	-37.33
	20. THERMO FISHER SCIENTIFIC					
	INC COM	01/30/2008	07/23/2010	1,012.79	1,031.60	-18.81
	20. UNITED TECHNOLOGIES CORP	04/30/2009	07/23/2010	1,406.58	1,000.04	06.
	55. XILINX INC COM	00	3/201	85.6	21.0	64
	۱.	03/13/2009	3/201	,742.8	,980.4	2
	25. COVANCE INC COM	10/09/2007	08/12/2010	,012.7	, 963.	-950.41
	INC COM	/13/	08/12/2010	,620.3	1,446.00	174.37
	. CVS/CAREMARK CORP	5/09/2	9/10/2	익	85.4	-857.58
	CAREMARK CORP	4/30/2	09/10/2010	724.24	792.32	-68.08
	25. CVS/CAREMARK CORP	1/14/2	9/10/201	24.2	658.50	65.74
	. CVS/CAREMARK	3/13/200	9/10/201	,621.2	,26	353.71
	. VISA INC COM CL	9/04/2	/10/2	1,353.17	1,418.60	-65.43
	. VISA INC COM C	6/15/200	09/10/2010		6,499.99	265.87
	. ADOBE SYS INC	09/04/2009	09/23/2010	1,054.39	1,266.40	$\vdash$
	. ADOBE SYS INC C	06/15/2009	09/23/2010	6,589.91	7,235.00	4
	15. AIR PRODUCTS & CHEMICALS					
	INC COM	05/04/2006	10/08/2010	1,237.47	,028.8	208.62
	. APPLE INC COM	4/04/200	10/08/2010	2,919.05	1,545.80	7
	5. BHP BILLITON LTD SPONS ADR	01/30/2008	10/08/2010	404.44	3	70.95
Totals						

UNITED WAY OF COLLIER CNTY ENDW 20 Schedule D Detail of Long-term Capital Gains and Losses

	Date	Date	Gross Sales	Cost or Other	Long-term
Description	Acquired	Sold	Price	Basis	Gain/Loss
10. BHP BILLITON LTD SPONS ADR	09/04/2009	10/08/2010	808.88	621.26	187,62
	0	10/08/2010	9.000,	2,475.90	-475.24
. COLGATE	8	/80/0	1,109.38	1,120.89	-11.51
ICE INC COM	/13/20	10/08/2010	07.3	542.25	165.13
. WALT	/25/200			40.3	S
ESOURC	06/15/2007	10/08/2010	9	,208.	270.11
. EATC	9/21/20	0/08/2	5	87.6	243.99
10. EATON CORP COM	01/14/2009	10/08/2010	831.58	474.30	57.2
10. EXXON MOBIL CORP COM	11/08/2006	10/08/2010	4.	39.2	-99.72
INC COM CL A	12/05/2008	10/08/2010	9	61.	499.14
50. HEWLETT PACKARD CO COM	4/30/200	10/08/2010	,055.9	57.6	198.34
. INTEL CO	1/30/200	/2	1	,367.6	0
. JP MORGAN	6/2	0/08/20		1,630.87	S
. MEDTRONIC INC CO	/06/200	$\neg$	,167.2	,771.3	
15. PEABODY ENERGY CORP COM	06/15/2009	10/08/2010		9	272.64
5. PEABODY	04/30/2009	10/08/2010			
5. T ROWE PRICE GROUP INC COM	04/30/2009	10/08/2010		99.9	2
15. T ROWE PRICE GROUP INC COM	12/05/2008	10/08/2010	5		
40. QUANTA SERVICES INC COM	06/15/2009	10/08/2010	788.38	938.20	-149.82
	04/30/2009	10/08/2010	315.64	251.97	63.67
35. TEVA PHARMACEUTICAL INDS					
LTD SPONS ADR	10/09/2007	10/08/2010	1,857.06	1,547.00	310.06
15. THERMO FISHER SCIENTIFIC					
INC COM	06/15/2009	10/08/2010	714.89	605.55	109.34
15. UNITED TECHNOLOGIES CORP	04/30/2009	10/08/2010	1,090.03	750.03	340.00
INC COM	5/09/200	0/08/201	,029.9	,033.4	- i
. QUANTA SERVICE	6/15/2	2/16/201	,087.	0.0	-202.13
. CISCO SYS INC	/05/200	/201	19.	4,401.60	81.
- 1	1/08/200	2/22/	S)	506.80	-116.80
10. CISCO SYS INC COM	/04/		195.00	248.10	-53.10
	06/21/2004	12/22/2010	ω	70.	-80.81
CATNI 15% BATE CABITAL CAINS (108988)			00 121 035	348 210 00	11 954 00
ONTED THE TWO TIEST SCT			0.404,00	70,012,01	0.400
Totals			360,164.00	348,210.00	11,954.00

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