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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning July 1 , 2011, and ending June 30 , 20 12

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

C Name of organization **Heart of Illinois United Way Inc**

Doing Business As **Heart of Illinois United Way Inc.**

Number and street (or P O box if mail is not delivered to street address) **509 West High Street** Room/suite

City or town, state or country, and ZIP + 4 **Peoria IL 61606**

D Employer identification number **37-0661504**

E Telephone number **309-674-5181**

G Gross receipts $ **8848788**

F Name and address of principal officer **Michael Stephan, 509 West High Street, Peoria, IL 61606**

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ **www.hoiunitedway org**

K Form of organization ☐ Corporation ☐ Trust ☐ Association ☑ Other ▶ **Nonprofit** L Year of formation **1922** M State of legal domicile **IL**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities. **To increase the organized capacity of people in Central Illinois to care for one another To create a strong, safe and healthy community while providing the best return for the community's charitable investment**		
	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	17
	6	Total number of volunteers (estimate if necessary)	6	4500
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	6308635	6370074
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	65342	27686
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5515	50
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6379492	6397810
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4491448	4589803
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1217294	1199587
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 788132		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	487119	506728
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6195861	6296118
	19	Revenue less expenses. Subtract line 18 from line 12	183631	101692

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	10393753	11017078
	21	Total liabilities (Part X, line 26)	7492220	8609604
	22	Net assets or fund balances Subtract line 21 from line 20	2901533	2407474

Part II Signature Block

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

Sign Here

Signature of officer — Date 2/14/13

Type or print name and title MICHAEL STEPHAN

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2011)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

1 Briefly describe the organization's mission:

To increase the organized capacity of people in central Illinois to care for one another

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 1893463 including grants of $ 1379862) (Revenue $)

Youth programs are funded at various nonprofit partner agencies to help at-risk youth develop physically, emotionally and socially by improving grade levels, development skills, relationships and much more Programs include mentoring, tutoring, counseling, childcare and afterschool programs that focus on a child's development and school readiness through positive social and emotional skills and safe, nurturing environments Help youth develop life skills and learning activities that lead to academic achievement, goal setting and higher graduation rates. Preventions and intervention through school-based activities that support social and emotional well-being.

4b (Code:) (Expenses $ 1606498 including grants of $ 1171388) (Revenue $)

Family programs help at-risk families function successfully in the community by providing social, health, emergency and educational resources. Programs include counseling, disaster services, legal services, emergency shelter and parenting skills that focus on: counseling and case management that develop skills which lead to stable lifestyles, provide immediate crisis support for families in need, training and support that help family members become parents and provide legal support that allows families to be secure and stable.

4c (Code:) (Expenses $ 1304651 including grants of $ 951444) (Revenue $)

Health programs help at-risk individuals lead healthier and safer lifestyles by preventing health deterioration and promoting healthy behaviors Programs include community clinics, exercise and therapy, emergency response, home health care, substance abuse prevention. Programs focus on education and prevention through nutritional training and information, physical fitness leading to healthy lifestyles, and addressing the root causes of underage pregnancy, sexually transmitted diseases and substance abuse. Treatment and health services that are proactive in treating general healthcare needs, oral care, vision care and mental health care

4d Other program services (Describe in Schedule O.)
(Expenses $ 1491506 including grants of $ 1087109) (Revenue $)

4e **Total program service expenses ▶** 6296118

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✓	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✓
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		✓
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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		✓
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*	11a	✓	
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*	11b		✓
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*	11c		✓
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*	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✓
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*	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	✓	
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		✓
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✓
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✓
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✓	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		✓
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? *If "Yes," complete Schedule J*	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
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		✓
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	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		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		✓
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	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*	35b		✓
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		✓
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		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . .	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	17		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) . .				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	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.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 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			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . .	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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.				
b	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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .	14b			

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . .	1a	36		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	36		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3			✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			✓
6	Did the organization have members or stockholders?	6		✓	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		✓	
b	Each committee with authority to act on behalf of the governing body?	8b		✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .	9			✓

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c		✓
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ **Illinois**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ **Mary Brown, 509 West High Street, Peoria, IL 61606**

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 . . . . . ☐

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

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

☑ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Andrew Herrera Chair	1.5	✓						0	0	0
(2) William Springer Chair Elect	1.5	✓						0	0	0
(3) William Cirone Vice Chair Resource Development	2.0	✓						0	0	0
(4) Paula Cirone Vice Chair Resource Development	2.0	✓						0	0	0
(5) Michelle Hubble Treasurer	1 5	✓						0	0	0
(6) Jonathan Williams Vice Chair Community Investment	1 5	✓						0	0	0
(7) Alan Black Vice Chair Marketing/Communications	1.5	✓						0	0	0
(8) Janice Kepple Secretary	1.0	✓						0	0	0
(9) Kevin Anderson Director	.5	✓						0	0	0
(10) Robert Anderson Director	5	✓						0	0	0
(11) Patricia Bash Director	.5	✓						0	0	0
(12) William Comstock Director	.5	✓						0	0	0
(13) Michael Everett Director	.5	✓						0	0	0
(14) Gail Garrison Director	.5	✓						0	0	0

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 . . . . . ☐

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

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

☑ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) (26) Timothy Neuhauser Director	5	✓						0	0	0
(2) (27) Stan Odgen Director	5	✓						0	0	0
(3) (28) Leonard Sachs Director	.5	✓						0	0	0
(4) (29) Tony Schierbeck Director	.5	✓						0	0	0
(5) (30) Dan Silverthorn Director	.5	✓						0	0	0
(6) (31) Sally Snyder Director	5	✓						0	0	0
(7) (32) Scott Sorrel Director	5	✓						0	0	0
(8) (33) Mark Spenny Director	5	✓						0	0	0
(9) (34) Marjorie Spinger Director	.5	✓						0	0	0
(10) (35) Nathan Thomas Director	.5	✓						0	0	0
(11) (36) Joseph VanFleet Director	.5	✓						0	0	0
(12) (37) Michael Stephan President	45					✓		139987	0	32662
(13)										
(14)										

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) James Hefti Director	.5	✓						0	0	0
(16) Martin Helfers Director	.5	✓						0	0	0
(17) Timothy Howard Director	.5	✓						0	0	0
(18) Roger Kilpatrick Director	.5	✓						0	0	0
(19) Bernard Koch Director	.5	✓						0	0	0
(20) Grenita Lathan Director	.5	✓						0	0	0
(21) Stuart Levenick Director	.5	✓						0	0	0
(22) Paul Macek Director	.5	✓						0	0	0
(23) Kenneth Mauser Director	5	✓						0	0	0
(24) Katherine McGinn Director	.5	✓						0	0	0
(25) Mark Miskell Director	5	✓						0	0	0
1b Sub-total							▶	0	0	0
c Total from continuation sheets to Part VII, Section A							▶	139987	0	32662
d Total (add lines 1b and 1c)							▶	139987	0	32662

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	0				
	d Related organizations	1d	0				
	e Government grants (contributions)	1e	0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6370074				
	g Noncash contributions included in lines 1a-1f $		47300				
	h **Total.** Add lines 1a–1f ▶			6370074			
Program Service Revenue		Business Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a–2f ▶			0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			27686	27686	0	27686
	4 Income from investment of tax-exempt bond proceeds ▶			0			
	5 Royalties ▶			0			
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶			0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶			0			
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18 a						
	b Less: direct expenses b						
	c Net income or (loss) from fundraising events ▶			0			
	9a Gross income from gaming activities. See Part IV, line 19 a						
	b Less. direct expenses b						
	c Net income or (loss) from gaming activities ▶			0			
	10a Gross sales of inventory, less returns and allowances a						
	b Less: cost of goods sold b						
	c Net income or (loss) from sales of inventory ▶			0			
	Miscellaneous Revenue		Business Code				
	11a Memorials		900099	50	50	0	50
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d ▶			50			
	12 **Total revenue.** See instructions. ▶			6397810	27736	0	27736

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).

Check if Schedule O contains a response to any question in this Part IX . . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	4589803	4589803		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22 . .	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees	390716	118084	119479	153153
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	442653	152626	72328	217699
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	195579	54636	69975	70968
9	Other employee benefits	106253	26791	19107	60355
10	Payroll taxes	64386	18225	26894	19267
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	25	0	25	0
c	Accounting	22009	6438	7906	7665
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	879	879	0	0
g	Other	0	0	0	0
12	Advertising and promotion . . .	37196	22318	0	14878
13	Office expenses	18824	9157	3154	6513
14	Information technology	17506	3896	1186	12424
15	Royalties	0	0	0	0
16	Occupancy	65067	36045	12845	16177
17	Travel	10394	3197	2007	5190
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	20074	1968	5084	13022
20	Interest	0	0	0	0
21	Payments to affiliates	94922	33792	20598	40532
22	Depreciation, depletion, and amortization .	28572	9245	6568	12759
23	Insurance	8129	2488	2820	2821
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Membership Dues	1970	903	859	208
b	Officers' Liability	2050	427	769	854
c	Gifts In Kind/Contributed Services	47300	0	0	47300
d	Postage	10735	1511	2299	6925
e	All other expenses Miscellaneous	121076	34171	7483	79422
25	**Total functional expenses.** Add lines 1 through 24e	6296118	5126600	381386	788132
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	75	1	75
	2	Savings and temporary cash investments	7756445	2	8301279
	3	Pledges and grants receivable, net	2404950	3	2503059
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D — 10a: 1132471			
	b	Less accumulated depreciation — 10b: 919806	232283	10c	212665
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	10393753	16	11017078
Liabilities	17	Accounts payable and accrued expenses	3025772	17	4009984
	18	Grants payable	4466448	18	4599620
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26	**Total liabilities.** Add lines 17 through 25	7492220	26	8609604
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	2901533	27	2407474
	28	Temporarily restricted net assets	0	28	0
	29	Permanently restricted net assets	0	29	0
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	0	30	0
	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
	33	Total net assets or fund balances	2901533	33	2407474
	34	Total liabilities and net assets/fund balances	10393753	34	11017078

Part 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	6397810
2	Total expenses (must equal Part IX, column (A), line 25)	2	6296118
3	Revenue less expenses. Subtract line 2 from line 1	3	101692
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2901533
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-595751
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	2407474

Part 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: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
Heart of Illinois United Way Inc	37-0661504

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

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

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

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

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

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

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

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

9 ☐ An organization that normally receives: (1) more than 33⅓% 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 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . . 11g(i)		
(ii) A family member of a person described in (i) above? . . . . . 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . 11g(iii)		

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

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") . . .	7693413	7193101	6430414	6239580	6322774	33879282
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . .	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3 .	7693413	7193101	6430414	6239580	6322774	33879282
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) . . .						12368330
6 **Public support.** Subtract line 5 from line 4						21510952

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	7693413	7193101	6430414	6239580	6322774	33879282
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	167772	51396	73667	65342	27686	385863
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . .	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	104	271	225	5515	50	6165
11 **Total support.** Add lines 7 through 10						34271310

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	63 %
15	Public support percentage from 2010 Schedule A, Part II, line 14	15	62 %

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

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

Part III Support Schedule for Organizations Described in 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Line 10 - 2007 Memorial Income

Line 10 - 2008 Memorial Income

Line 10 - 2009 Memorial Income

Line 10 - 2010 Memorial Income

Line 10 - 2011 Memorial Income

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
Heart of Illinois United Way Inc	37-0661504

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

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 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
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (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

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 ▶ $ _____

(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 ▶ $ _____

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		65000		
c Leasehold improvements		558066		
d Equipment		509405		
e Other		0	919806	
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				212665

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12.)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶		

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

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶		

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6397810
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6296118
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	101692
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	-595751
9	Total adjustments (net). Add lines 4 through 8	9	-595751
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-494059

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

1	Total revenue, gains, and other support per audited financial statements			1	6397810
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	0		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIV.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	6397810
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1** :				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIV)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	6397810

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

1	Total expenses and losses per audited financial statements			1	6296118
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIV.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	6296118
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIV)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18)*			5	6296118

Part XIV Supplemental Information

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

Part XI - Line 8 - Pension related changes other than net periodic pension cost

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Heart of Illinois United Way Inc

Employer identification number

37-0661504

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Alzheimer's Accociation 606 W Glen, Peoria	371224417	501c3	14926				
(2) American Red Cross 311 W John Gwynn, Peoria	370661180	501c3	306868				
(3) Big Brothers Big Sisters 1212 SW Adams, Peoria	371082017	501c3	59999				
(4) Boy Scouts 614 NE Madison, Peoria	370661188	501c3	125437				
(5) Boys & Girls Club 806 Kansas, Peoria	370800010	501c3	176994				
(6) Cancer Ctr for Healthy Living 5215 Knoxville, Peoria	371363257	501c3	21249				
(7) Center for Prevention of Abuse PO Box 3855, Peoria	371037950	501c3	317212				
(8) Ctr for Youth & Family Solution 2610 W Richwoods, Peoria	453251182	501c3	201523				
(9) Children's Home 2130 N Knoxville , Peoria	370662601	501c3	136130				
(10) Children's Hospital 530 NE Glen Oak, Peoria	371259284	501c3	47784				
(11) Common Place 514 Shelley, Peoria	370918811	501c3	67766				
(12) CWTC 3215 University, Peoria	376057596	501c3	146850				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 38

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Heart of Illinois United Way Inc.

Employer identification number

37-0661504

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Crittenton Center 442 John Gwynn, Peoria	370661506	501c3	202887				
(2) Easter Seals 507 E Armstrong, Peoria	370686250	501c3	109945				
(3) Family Core 330 Washington, Peoria	370661193	501c3	345246				
(4) Friendship House 800 NE Madison, Peoria	370799752	501c3	162358				
(5) Girl Scouts 1103 W Lake, Peoria	370681259	501c3	12492				
(6) Heartland Comm Clinic 1701 Garden, Peoria	371270794	501c3	114999				
(7) Hult Health 5215 Knoxville, Peoria	363510390	501c3	110987				
(8) Human Service Center 600 Fayette, Peoria	371004882	501c3	42677				
(9) IL Valley Ctr for Indep Living 18 Gunia, LaSalle	364228559	501c3	5760				
(10) Neighborhood House 1020 Matthew, Peoria	370661229	501c3	236824				
(11) Parc PO Box 3418, Peoria	370794792	501c3	38223				
(12) Pearce Community Center 610 W Cedar, Chillicothe	371252061	501c3	1900				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Heart of Illinois United Way Inc.

Employer identification number

37-0661504

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Planned Parenthood 704 NE Jefferson, Peoria	362170901	501c3	42741				
(2) Prairie State Legal Services 331 Fulton, Peoria	371030764	501c3	144940				
(3) St. Francis Community Clinic 530 NE Glen Oak, Peoria	370661235	501c3	124111				
(4) Salvation Army 401 NE Adams, Peoria	362167910	501c3	229544				
(5) South Side Office of Concern 301 Jefferson, Peoria	371173520	501c3	109999				
(6) TCRC 21310 IL Rte 9, Tremont	376016936	501c3	128406				
(7) Tri-County Urban League 317 MacArthur, Peoria	370888235	501c3	367689				
(8) We Care 622 Jackson, Morton	371078601	501c3	90851				
(9) YMCA 7000 Fleming, Peoria	370662605	501c3	24999				
(10) YWCA 826 SW Adams, Peoria	370661266	501c3	83911				
(11) Bradley University 1501 Bradley Avenue, Peoria		501c3	150000				
(12) Lutheran Social Service 3000 W Rohmann, West Peoria		501c3	10000				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Heart of Illinois United Way Inc.

Employer identification number

37-0661504

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CASA 324 Main Street, Peoria	201534971	501c3	45393				
(2) Habitat for Humanity 931 N Douglas, Peoria	371250405	501c3	40000				
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

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

Partner agencies submit reports detailing how many clients were provided assistance or units of service that were performed during the grant cycle. They substantiate what services were given and that they were in line with the uses of the grant Volunteers review these reports to verify the funds were being used for the intended purposes and the outcomes are enough to justify the grants. Volunteers and staff also do site visits to see the programs in action. HOIUW staff conducts yearly audits of the programs at each location to verify data is accurately being recorded and reported.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Heart of Illinois United Way Inc.

Employer identification number

37-0661504

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . **2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? **4a**		✓
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**		✓
c	Participate in, or receive payment from, an equity-based compensation arrangement? **4c**		✓
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? **5a**		✓
b	Any related organization? **5b**		✓
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? **6a**		✓
b	Any related organization? **6b**		✓
	If "Yes" to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III **7**		✓
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**		✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Michael Stephan	(i)	139987			13593	19069	172649	167180
		(ii)							
2		(i)							
		(ii)							
3		(i)							
		(ii)							
4		(i)							
		(ii)							
5		(i)							
		(ii)							
6		(i)							
		(ii)							
7		(i)							
		(ii)							
8		(i)							
		(ii)							
9		(i)							
		(ii)							
10		(i)							
		(ii)							
11		(i)							
		(ii)							
12		(i)							
		(ii)							
13		(i)							
		(ii)							
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
Heart of Illinois United Way Inc.

Employer identification number
37-0661504

Part III, 4d - Self-reliance programs help at-risk people live on their own by helping them gain the skills they need to get through life. Programs include counseling, employment services, life skills, food pantries, emergency assistance and transitional housing that focus on: providing supportive housing that is affordable and helps mitigate factors that lead to homelessness such as low income, substance abuse, health issues, and aging. Create financial stability through education and employment services such as job preparedness and training. Optimize services for individuals such as seniors and the developmentally disabled so they can continue to live independently Community in Schools is a collaborative program between Peoria Public Schools, Bradley University and Heart of Illinois United Way partner agencies that administers substance abuse, violence prevention and mental health programs for students in kindergarten through high school The program focuses on mental health screening and counseling, substance abuse prevention and abeyance case management.

Part VI, Section B, 11a - Staff members review the 990 before it is filed. The 990 is made available for the Board of Directors to review.

Part VI, Section B, 15 - At the beginning of each fiscal year, staff fills out a report with goals and objectives outlined for the fiscal year. At the end of the year, staff responds to their goals and objectives and immediate supervisor also responds to goals and objectives Merit increases are based on how well the employee did at meeting or exceeding these goals and objectives established at the beginning of the fiscal year. Each position has a salary range that is updated based on current pay studies and employee pay rates are based on these ranges.

Part VI, Section C, 19 - The organization's 990 and audits are available to the public. If a member of the public would like to view these documents, they may request them and a copy will be supplied within 2 business days.

THE HEART OF ILLINOIS UNITED WAY, INC.

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CliftonLarsonAllen

CliftonLarsonAllen LLP
www.cliftonlarsonallen.com

Independent Auditor's Report

Board of Directors
The Heart of Illinois United Way, Inc.
Peoria, Illinois

We have audited the accompanying statement of financial position of The Heart of Illinois United Way, Inc., as of June 30, 2012, and the related statements of activities, cash flows, and functional expenses for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit. The prior period summarized comparative information has been derived from the Organization's June 30, 2011 financial statements and, in our report dated December 14, 2011, we expressed an unqualified opinion on those financial statements.

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

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Heart of Illinois United Way, Inc., as of June 30, 2012, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying supplementary information is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

CliftonLarsonAllen LLP

Peoria, Illinois
November 13, 2012

THE HEART OF ILLINOIS UNITED WAY, INC.
STATEMENT OF FINANCIAL POSITION
June 30, 2012
With Comparative Figures for June 30, 2011

ASSETS

	2012	2011
Cash and cash equivalents (including interest-bearing deposits of $6,136,865 in 2012 and $5,740,303 in 2011)	$ 6,141,940	$ 5,740,378
Certificates of deposit	1,969,742	1,820,765
Other investments	189,672	195,377
Pledges receivable:		
Current campaign	1,140	4,468
Prior campaigns	2,894,448	2,794,652
Other	-	6,674
	2,895,588	2,805,794
Less allowance for uncollectibles	(392,529)	(400,844)
Net pledges receivable	2,503,059	2,404,950
Property and equipment:		
Land and buildings, at donated value	65,000	65,000
Land improvements, at cost	54,790	54,790
Building improvements, at cost	503,276	498,776
Equipment, at cost	509,405	504,951
	1,132,471	1,123,517
Less accumulated depreciation	(919,806)	(891,234)
	212,665	232,283
TOTAL ASSETS	$ 11,017,078	$ 10,393,753

LIABILITIES AND NET ASSETS

	2012	2011
LIABILITIES		
Accounts payable:		
Trade	$ 40,893	$ 46,513
Campaign designations	1,781,001	1,545,587
Noncampaign out-of-area designations	636,192	467,482
Accrued expenses	154,177	142,031
Deferred revenue	19,048	-
Pension liability	1,378,673	824,159
Allocations payable to agencies	4,449,620	4,291,448
Community initiatives payable	150,000	175,000
Total liabilities	8,609,604	7,492,220
NET ASSETS		
Unrestricted:		
Undesignated	212,665	232,283
Designated:		
Future allocations to agencies	100,677	650,328
Operating budget 2013 and 2012, respectively	1,624,100	1,560,800
Success By Six	217,229	200,324
Keim Fund	175,852	186,242
Memorials	42,530	37,015
Capital expenditures	34,421	34,541
	2,194,809	2,669,250
Total net assets	2,407,474	2,901,533
TOTAL LIABILITIES AND NET ASSETS	$ 11,017,078	$ 10,393,753

The accompanying notes are an integral part of the financial statements.

THE HEART OF ILLINOIS UNITED WAY, INC.
STATEMENT OF ACTIVITIES
Year Ended June 30, 2012
With Comparative Figures for the Year Ended June 30, 2011

	Unrestricted	
	2012	2011
REVENUE, GAINS, AND OTHER SUPPORT		
Contributions:		
Annual campaigns	$ 8,821,052	$ 8,508,584
Less donor designations	(2,213,153)	(1,867,920)
Provision for uncollectible pledges	(285,125)	(401,084)
Net campaign revenue	6,322,774	6,239,580
Gifts in kind and contributed services	47,300	69,055
Memorials	50	5,515
Total contributions	6,370,124	6,314,150
Interest income	25,871	32,356
Net unrealized and realized gain on investments	1,815	32,986
Total revenue, gains, and other support	6,397,810	6,379,492
ALLOCATIONS AND EXPENSES		
Allocations to agencies	4,394,070	4,291,448
Allocations for community initiatives	195,733	200,000
Program services	536,797	502,908
Supporting services	1,169,518	1,201,505
Total allocations and expenses	6,296,118	6,195,861
Increase in net assets	101,692	183,631
PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST	(595,751)	301,954
TOTAL CHANGE IN NET ASSETS	(494,059)	485,585
NET ASSETS, BEGINNING OF YEAR	2,901,533	2,415,948
NET ASSETS, END OF YEAR	$ 2,407,474	$ 2,901,533

The accompanying notes are an integral part of the financial statements.

THE HEART OF ILLINOIS UNITED WAY, INC.
STATEMENT OF CASH FLOWS
Year Ended June 30, 2012
With Comparative Figures for the Year Ended June 30, 2011

	2012	2011
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ (494,059)	$ 485,585
Adjustments to reconcile change in net assets to net cash provided by (used in) operating activities:		
Provision for uncollectible pledges	285,125	401,084
Net unrealized and realized (gain) on investments	(1,815)	(32,986)
Depreciation	28,572	36,597
Noncampaign out-of-area designations	168,710	(516,097)
Effects of changes in operating assets and liabilities:		
Net pledges receivable	(383,234)	(259,427)
Accounts payable - trade	(5,620)	22,110
Campaign designations	235,414	(269,610)
Accrued expenses	12,146	11,649
Pension liability	554,514	(256,564)
Deferred revenue	19,048	-
Allocations payable	158,172	(66,768)
Community initiatives payable	(25,000)	25,000
Net cash provided by (used in) operating activities	551,973	(419,427)
CASH FLOWS FROM INVESTING ACTIVITIES		
Capital expenditures	(8,954)	(17,244)
Purchases of certificates of deposit	(2,161,286)	(1,779,617)
Purchases of investments	(2,480)	(1,109)
Proceeds from investments	10,000	-
Proceeds from maturity of certificates of deposit	2,012,309	1,709,044
Net cash used in investing activities	(150,411)	(88,926)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	401,562	(508,353)
CASH AND CASH EQUIVALENTS		
Beginning of year	5,740,378	6,248,731
End of year	$ 6,141,940	$ 5,740,378

The accompanying notes are an integral part of the financial statements.

THE HEART OF ILLINOIS UNITED WAY, INC.
STATEMENT OF FUNCTIONAL EXPENSES
Year Ended June 30, 2012
With Comparative Figures for the Year Ended June 30, 2011

	Program Services		
	Budgeting, Allocations, and Agency Relations	Planning and Evaluation	AFL-CIO Community Services
Salaries	$ 191,703	$ -	$ 53,670
Pension	40,541	263	13,832
Other employee benefits	31,914	5,599	7,503
Professional fees	2,978	1,730	1,730
Office supplies	953	729	1,225
Telephone	866	598	660
Postage	493	493	525
Occupancy	32,952	2,275	3,084
Equipment rentals and maintenance	411	411	411
Communications	725	21	1,023
Local transportation	2,958	-	130
Conferences and meetings	1,309	-	625
Membership dues	844	6	29
Bank trust management fees	-	-	879
Officer's liability insurance	256	-	171
Computer supplies and maintenance	2,576	155	1,165
[illegible] fees:			
[illegible]	8,076	8,076	14,112
[illegible]	941	942	1,645
Total before gifts in kind and contributed services and depreciation	320,496	21,298	102,419
Gifts in kind and contributed services	-	-	-
Depreciation	5,616	373	1,795
TOTAL FUNCTIONAL EXPENSES	$ 326,112	$ 21,671	$ 104,214

			Supporting Services			Total	
Success By Six	Total	Fund Raising	Management and General	Total	2012	2011
$ 25,337	$ 270,710	$ 370,852	$ 191,807	$ 562,659	$ 833,369	$ 820,345
-	54,636	70,968	57,089	128,057	182,693	195,390
-	45,016	79,622	58,887	138,509	183,525	201,559
-	6,438	7,665	7,931	15,596	22,034	21,386
6,250	9,157	6,513	3,154	9,667	18,824	13,072
-	2,124	3,722	4,490	8,212	10,336	9,609
-	1,511	6,925	2,299	9,224	10,735	10,105
222	38,533	18,998	15,665	34,663	73,196	42,413
-	1,233	1,749	1,568	3,317	4,550	4,930
51,363	53,132	88,829	1,425	90,254	143,386	145,254
109	3,197	5,190	2,007	7,197	10,394	8,741
34	1,968	13,022	5,084	18,106	20,074	17,839
24	903	208	859	1,067	1,970	2,390
-	879	-	-	-	879	680
-	427	854	769	1,623	2,050	2,050
-	3,896	12,424	1,186	13,610	17,506	10,023
-	30,264	36,301	18,448	54,749	85,013	83,835
-	3,528	4,231	2,150	6,381	9,909	9,140
83,339	527,552	728,073	374,818	1,102,891	1,630,443	1,598,761
-	-	47,300	-	47,300	47,300	69,055
1,461	9,245	12,759	6,568	19,327	28,572	36,597
$ 84,800	$ 536,797	$ 788,132	$ 381,386	$ 1,169,518	$ 1,706,315	$ 1,704,413

The accompanying notes are an integral part of the financial statements.

THE HEART OF ILLINOIS UNITED WAY, INC.
NOTES TO FINANCIAL STATEMENTS
June 30, 2012

NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Heart of Illinois United Way, Inc. (Organization) is a not-for-profit organization established to increase the organized capacity of people in Central Illinois to care for one another.

The Organization reports in accordance with the American Institute of Certified Public Accountants Audit and Accounting Guide, *Not-for-Profit Organizations*. Under the terms of that guide, the following accounting policies unique to voluntary health and welfare organizations are followed:

(a) The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

(b) The Organization reports gifts of cash and other assets that must be used to acquire long-lived assets and gifts of land, buildings, and equipment as temporarily restricted support. The Organization reports expirations of restrictions when the donated or acquired long-lived assets are either sold or depreciated.

(c) Certain campaign contributions are designated to specific United Way funded agencies by the donor. The Organization has no discretion over the use of the assets received and, therefore, is considered to be acting in an agency capacity. As such, resources received and allocations made are reported as increases and decreases in assets and liabilities.

The Organization acts as a fiscal agent for other noncampaign out-of-area designations (e.g., designations and distributions to other United Ways). The Organization collects and distributes these contributions and they are excluded from annual campaign contributions.

(d) Annual campaigns are conducted to raise support for participating agencies in subsequent periods.

i. Net Pledges Receivable

Contributions pledged, less a provision for uncollectible amounts, are recorded as receivables in the year made.

NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

ii. Allocations Payable

Allocations payable are recorded as a payable in the period the allocation to the participating agency is approved. Allocations payable at June 30, 2012 and June 30, 2011 are payable from the campaign periods ended March 31, 2012 and 2011, respectively.

iii. Community Initiatives Payable

Community initiatives payable are recorded as a payable in the period the allocation to the agency or other organizations is approved. Community initiatives payable at June 30, 2012 and June 30, 2011 are payable from the campaign periods ended March 31, 2012 and 2011, respectively.

iv. Annual Campaigns

Annual campaigns are conducted for the period April 1 through March 31.

Contributions from the annual campaigns, which are recorded in the statement of activities, represent the pledges obtained in the applicable financial statement reporting period.

v. Allocations to Agencies

Allocations to agencies, which are recorded in the Statement of Activities, represent the allocations approved during the reporting period applicable to the next allocation period, as adjusted for additions and refunds of previous years' allocations.

vi. Allocations for Community Initiatives

Allocations for community initiatives, which are recorded in the Statement of Activities, represent the allocations approved during the reporting period for the Peoria Area Community & Education Services (PACES).

vii. Designated Net Assets - Future Allocations

At June 30, 2012, designated net assets include $60,277 of future allocation amounts to agencies designated by the Board of Directors to be available for allocation to participating agencies during the period July 1, 2013 through June 30, 2014.

NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Donated materials, property and equipment, and investments are recorded at fair value when received.

(f) Gifts in Kind and Contributed Services - Noncash asset contributions (gifts in kind) and contributed services are recorded as revenue when received and the related expenses, at the time the expenses are recognized, are reported by function based on the nature of the contributed item. Gifts in kind include advertising space, supplies, and prizes. Contributed services relate to professional services requiring specialized skills, and are provided by entities or persons possessing those skills, and would be purchased if they were not donated. These contributions are recorded at their approximate fair value. The Organization receives services from a large number of volunteers who give significant amounts of their time to the Organization's programs and fund-raising campaigns, but which do not meet the criteria for financial statement recognition.

(g) Depreciation is provided, using the straight-line method, over the estimated useful life of the respective asset.

(h) Investments are carried at fair value in the statement of financial position and realized and unrealized gains and losses are reflected in the statement of activities. Certificates of deposit are carried at amortized cost.

(i) The Organization considers all short-term investments with a maturity at date of purchase of three months or less to be cash equivalents. Cash and cash equivalents at June 30, 2012 were comprised as follows:

Cash on hand	$ 75
Overnight sweep (repurchase agreement) and checking account, net	6,132,687
Money market accounts	6,034
Savings account	3,144
	$ 6,141,940

Prior Year Summarized Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2011, from which the summarized information was derived.

NOTE 1 - DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues, allocations, expenses, gains, losses, and other changes in net assets during the reporting period. Actual results could differ from those estimates.

NOTE 2 - OTHER INVESTMENTS

The carrying amount of other investments at June 30, 2012 is as follows:

Mutual funds:	
PNC Small Cap Core I	$ 15,033
PNC Large Cap Core Equity I	94,183
PNC International Equity I	15,179
Dodge & Cox Income Fund	32,510
PIMCO FDS Total Return Bond Fund	32,767
	$ 189,672

NOTE 3 - FAIR VALUE MEASUREMENTS

Generally accepted accounting principles (GAAP) establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under GAAP are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

NOTE 3 - FAIR VALUE MEASUREMENTS (CONTINUED)

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The Organization's investments described in Note 2 are invested in mutual funds which are recorded at fair value as determined by quoted market prices in active markets and, therefore, are classified as Level 1.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

NOTE 4 - DESIGNATED NET ASSETS - KEIM FUND

The Board of Directors has decided to invest the principal and provide allocations to health related agencies based upon approved annual requests. Included in investment income is $3,674, which was earned during the year ended June 30, 2012. The net unrealized and realized gain on investments in the Keim Fund was $1,815 during the year ended June 30, 2012.

NOTE 5 - PENSION PLAN

The Organization has a noncontributory defined benefit pension plan covering substantially all employees. The plan covers all full-time employees who have attained the age of 21 and who have completed one year of service. The Organization's funding policy is to contribute annually an amount sufficient to meet or exceed ERISA's minimum funding standards.

The following table sets forth the plan's funded status and amounts recognized in the Organization's financial statements at June 30, 2012:

Projected benefit obligation, at June 30	$ (3,331,829)
Plan assets at fair value, at June 30	1,953,156
Funded status	$ (1,378,673)

The accumulated benefit obligation at June 30, 2012 was $2,559,790.

Net periodic pension cost for the plan consisted of the following components for the year ended June 30, 2012:

Service cost	$ 136,898
Interest cost	150,520
Expected return on plan assets	(149,297)
Amortization of unrecognized transition asset	(9,626)
Recognition of net actuarial loss	30,268
Net periodic pension cost	$ 158,763
Employer contributions	$ 200,000
Benefits paid	$ 114,737

NOTE 5 - PENSION PLAN (CONTINUED)

The following are assumptions used to determine benefit obligations and net periodic benefit cost for the year ended June 30, 2012:

Benefit obligations:	
Discount rate	4.20%
Rate of compensation increase for future	3.50%
Net periodic benefit cost:	
Discount rate	5.50%
Expected long-term return on plan assets	8.00%
Rate of compensation increase	4.00%

The Organization's expected long-term rate of return on plan assets assumption of 8.00 percent is based on using the "building block" approach described by the Actuarial Standards Board in Actuarial Standards of Practice No. 27 - *Selection of Economic Assumptions for Measuring Pension Obligations*. Based on the Organization's investment policy for the pension plan in effect as of the beginning of the fiscal year, a best estimate range was determined for both the real rate of return (net of inflation) and for inflation based on historical 30 year period rolling averages. An average inflation rate within the range equal to 3.75 percent was selected and added to the real rate of return range to arrive at a best estimate range of 6.99 to 9.50 percent. The rate of 8.00 percent was selected.

The discount rate and expected long-term return on plan assets are critical assumptions which significantly affect pension accounting. Even relatively small changes in these rates would significantly change the recorded pension expense and accrued liability. Management believes the discount rate and expected long-term return on plan assets used in determining its year-end pension accounting are reasonable based on currently available information. However, it is at least reasonably possible that these assumed rates will be revised in the near term, based on future events and changes in circumstances.

NOTE 5 - PENSION PLAN (CONTINUED)

The following table summarizes plan assets measured at fair value on June 30, 2012, segregated by the level of the valuation inputs within the fair value hierarchy utilized to measure fair value.

Asset Category	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total Fair Value
Money Market	$ 186,014	$ -	$ -	$ 186,014
Equity securities (pooled separate accounts):				
Large Cap	-	709,931	-	709,931
Mid Cap	-	174,111	-	174,111
Small Cap	-	141,125	-	141,125
International	-	112,748	-	112,748
Total equity	-	1,137,915	-	1,137,915
Fixed income (pooled separate account)	-	629,227	-	629,227
Total	$ 186,014	$ 1,767,142	$ -	$ 1,953,156

The following is a brief description of the nature and significant investment strategies of the major categories of pooled separate accounts:

Large Cap Equity: This investment class is generally composed of investments in common stocks of companies that compose the S&P 500 Index and other large- and mid-cap companies. Management seeks long-term capital appreciation and income.

Mid Cap Equity: This investment class is generally composed of investments in common stocks of companies that compose the S&P MidCap 400 Index. Management seeks long-term growth of capital.

Small Cap Equity: This investment class is generally composed of investments in common stocks of small-capitalization companies. Management seeks long-term capital appreciation.

International Equity: This investment class is generally composed of investments in securities of international companies. Management seeks capital appreciation.

NOTE 5 - PENSION PLAN (CONTINUED)

Fixed Income: This asset class generally invests in investment-grade, publicly traded debt securities, such as bonds, U.S. government and agency securities, including mortgage-backed securities and zero coupon securities. Management seeks current income and preservation of capital.

The Organization's target asset allocation as of June 30, 2012, by asset category, is as follows:

Asset Category	
Equity	58%
Fixed income	32
Cash and cash equivalents	10
Total	100%

The Organization's investment policy includes various guidelines and procedures designed to provide that assets are invested in a manner necessary to meet expected future benefits earned by participants. The investment guidelines consider a broad range of economic conditions. Central to the policy are target allocation ranges (shown above) by major asset categories.

The objectives of the target allocations are to maintain investment portfolios that diversify risk through prudent asset allocation parameters, achieve asset returns that meet or exceed the plan's actuarial assumptions, and achieve asset returns that are competitive with like institutions employing similar investment strategies.

The investment policy is periodically reviewed by the Organization and a designated third-party fiduciary for investment matters. The policy is established and administered in a manner so as to comply at all times with applicable government regulations. The investment statements are reviewed quarterly by the Finance Committee.

The Organization expects to contribute $200,000 to its pension plan for the year ending June 30, 2013.

NOTE 5 - PENSION PLAN (CONTINUED)

The following benefit payments which reflect expected future service, as appropriate, are expected to be paid:

Fiscal Year	
2013	$ 81,000
2014	80,000
2015	82,000
2016	110,000
2017	110,000
2018-2022	629,000

Reconciliation of Items Not Yet Reflected in Net Periodic Pension Cost

	July 1, 2011	Reclassified as Net Periodic Pension Cost	Amounts Arising During Period	June 30, 2012
Transition asset	$ (21,965)	$ (9,626)	$ -	$ (12,339)
Net actuarial loss (gain)	706,052	30,268	616,393	1,292,177

Estimated Effect in Fiscal Year 2012 - Items Not Yet Reflected in Net Periodic Pension Cost

	July 1, 2012	Estimated Amounts to be Reclassified as Net Periodic Pension Cost
Transition asset	$ (12,339)	$ (9,626)
Net actuarial loss	1,292,177	72,872

No plan assets are expected to be returned to the employer during the 2013 fiscal year.

NOTE 6 - INCOME TAXES

The Organization is exempt from federal and state income taxes under the applicable U.S. and Illinois revenue codes and, accordingly, no provision for such taxes has been made. The Organization has reviewed tax positions taken for filing with the Internal Revenue Service and the Illinois Department of Revenue. The Organization believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse effect on the Organization's financial condition, results of operations, or cash flows. Accordingly, the Organization has not recorded any reserves for uncertain income tax positions at June 30, 2012. The Organization is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The Organization believes they are no longer subject to income tax examinations for tax years ending prior to June 30, 2009.

NOTE 7 - RESPONSIBILITY FOR OTHER CAMPAIGNS

The Organization serves as the Principal Combined Fund Organization (PCFO) for the Central Illinois Combined Federal Campaign which raised $263,044 during the year ended June 30, 2012. As PCFO, the Organization performs administrative duties including collection of contributions, distribution of funds, and maintenance of accounts and records. The Organization, as a Federation, honors all designations to its member agencies through its federal campaign.

The funds relating to this campaign, which were $134,907 for the year ended June 30, 2012, are not the property of the Organization and are not included in these financial statements.

NOTE 8 - SIGNIFICANT CONCENTRATIONS

Approximately 56 percent of the 2011/2012 campaign contributions was pledged by one company and its employees. The pledges receivable at June 30, 2012 from this company's employees totaled approximately $1,315,000.

The Organization maintains deposit balances in excess of $250,000 in banks, which are insured by the Federal Deposit Insurance Corporation up to $250,000. At June 30, 2012, the Organization's uninsured deposits totaled $127,851.

NOTE 9 - RISKS AND UNCERTAINTIES

The Organization invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the investment balances in the Organization's pension plan and the amounts reported in the statement of activities.

NOTE 10 - SUBSEQUENT EVENTS

Management evaluated subsequent events through November 13, 2012, the date the financial statements were available to be issued.

THE HEART OF ILLINOIS UNITED WAY, INC.
SCHEDULE OF ALLOCATIONS TO AGENCIES
Year Ended June 30, 2012

	Total Allocations Payable June 30, 2011	Allocation Adjustments in 2012	Allocations Paid in 2012	Campaign Allocations For the Period July 1, 2012 Through June 30, 2013	Total Allocations Payable June 30, 2012
Alzheimer's Association	$ 29,955	$ -	$ 29,955	$ 14,926	$ 14,926
American Red Cross	398,156	-	398,156	306,868	306,868
Arthritis Foundation	22,286	(18,572)	3,714	-	-
Big Brothers/Big Sisters	44,782	-	44,782	59,999	59,999
Boy Scouts	134,679	-	134,679	125,437	125,437
Boys and Girls Club	164,990	-	164,990	176,994	176,994
CASA	-	-	-	45,393	45,393
Cancer Center for Health Living	4,999	-	4,999	21,249	21,249
Catholic Charities	221,822	(66,778)	155,044	-	-
Center for Youth and Family Solutions	-	66,778	66,778	201,523	201,523
Center for Prevention of Abuse	265,664	-	265,664	317,212	317,212
Children's Home	75,335	-	75,335	136,130	136,130
Children's Hospital	26,391	-	26,391	47,784	47,784
Community Workshop & Training Ctr.	123,672	-	123,672	146,850	146,850
Common Place	54,847	-	54,847	67,766	67,766
Crittenton Care and Counseling Ctr.	194,118	-	194,118	202,887	202,887
Easter Seals	53,986	-	53,986	109,945	109,945
Family Core	335,181	-	335,181	345,246	345,246
Friendship House	158,217	-	158,217	162,358	162,358
Girl Scouts	44,269	-	44,269	12,492	12,492
Habitat for Humanity	-	-	-	40,000	40,000
Heartland Community Clinic	116,399	-	116,399	114,999	114,999
Hult Health	61,669	-	61,669	110,987	110,987
Human Service Center	47,378	-	47,378	42,677	42,677
IL Valley Center for Independent Living	4,935	-	4,935	5,760	5,760
Lutheran Social Service	-	-	-	10,000	10,000
Neighborhood House	231,116	-	231,116	236,824	236,824
Peoria Assoc. for Retarded Citizens	33,310	-	33,310	38,223	38,223
Pearce Community Center	3,793	-	3,793	1,900	1,900
Planned Parenthood Association	39,658	-	39,658	42,741	42,741
Prairie State Legal Service	122,549	-	122,549	144,940	144,940
St. Francis Community Clinic	113,998	-	113,998	110,000	110,000
OSF Cystic Fibrosis	14,276	-	14,276	14,111	14,111
Salvation Army	251,619	-	251,619	229,544	229,544
South Side Office of Concern	64,800	-	64,800	109,999	109,999
Tazewell County Resource Centers	108,008	-	108,008	128,406	128,406
Tri-County Urban League	373,508	-	373,508	367,689	367,689
We Care, Inc.	73,126	-	73,126	90,851	90,851
Y.M.C.A.	11,041	-	11,041	24,999	24,999
Y.W.C.A.	262,716	(101,171)	161,545	83,911	83,911
Youth Service Bureau	4,200	-	4,200	-	-
TOTAL	$ 4,291,448	$ (119,743)	$ 4,171,705	$ 4,449,620	$ 4,449,620