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Form

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 2012 Open to Public

_	<del></del>	The state of the s	roporting roqui	TOTTOTIO.		spection							
<u> </u>	For the 2012 c	alendar year, or tax year beginning , and ending											
B	Check if applicable	C Name of organization		D Employ	er identificat	ion number							
Ш	Address change	United Ways of Tennessee											
$\overline{\Box}$	Name change	Doing Business As		62-	17734	.07							
믁	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number	<del></del> -							
╚	Initial return	209 Gothic Court	107	615	-791-	1161							
	Terminated	City, town or post office, state, and ZIP code		<u> </u>	<u> </u>	1404							
$\overline{\Box}$	Amended return	Franklin TN 37067				140 500							
닉	Amended return	F Name and address of principal officer	T	G Gross rece	eipts \$	148,593							
Ш	Application pending		H(a) Is this a g	roup return for a	affiliates?	Yes X No							
		Mary Graham, President	ľ	•		= :::							
		209 Gothic Court, Suite 107	l .	filiates include	•	Yes '_ No							
	<u> </u>	Franklin TN 37067	II *No	o," attach a list	(see instructi	ons)							
1	Tax-exempt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527											
J	Website: ▶ W	ww.uwtn.org	H(c) Group ex	emption numb	er 🕨								
ĸ	Form of organization	X Corporation Trust Association Other ► L Y	ear of formation 1	999	M State of le	egal domicile TN							
F	Part I Su	ummary											
	1 Briefly de	escribe the organization's mission or most significant activities.											
-	Soo	Schedule 0											
ĕ													
뎔													
ě													
Activities & Governance	2 Check th	is box $lacktriangle$ if the organization discontinued its operations or disposed of more than 25	5% of its net as:	sets									
8	3 Number	of voting members of the governing body (Part VI, line 1a)		3	17								
es	4 Number	of independent voting members of the governing body (Part VI, line 1b)		_4	17								
₹	5 Total nur	nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	1								
ᇴ	6 Total nur	nber of volunteers (estimate if necessary)		6	0								
	70 Total un	elated business revenue from Part VIII, column (C), line 12		7a		0							
	b Net unre	7b		0									
	21101 41110	lated business taxable income from Form 990-T, line 34	Prior Yea		Cur	rent Year							
	1	tions and grants (Part VIII, line 1h)	16	2,325		148,432							
Ę	9 Program	service revenue (Part VIII, line 2g)		0		0							
Revenue	10 Investme	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)											
8	11 Other re	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)											
	1		16	0 2,812		0 148,593							
		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10										
		nd similar amounts paid (Part IX, column (A) Lines 1-3)		0		0							
		paid to or for members (Part IX Polumn A) (ne-4)	1.0	0 040		0							
8	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	10	9,948		119,716							
enses	16a Professi	onal fundraising fees (Parting column (A), line 11e)		0		0							
Expe	.   <b>b</b> Total fun	draising expenses (Part X, dolumn (D), line 25) → ∽ ∽ ∽ ∪											
Ŵ	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 1.1f-24e)	12	2,248		38,049							
	18 Total exp	penses. Add lines 13-17 (must equal Part X column A), line 25)	23			<u>157,765</u>							
	19 Revenue	less expenses Subtract line 18 from line 12	-6	9,384		-9,172							
ō	Sec		Beginning of Cu		En	d of Year							
Set	20 Total ass	sets (Part X, line 16)		7,242		<u> 157,070</u>							
A.	21 Total liat	olities (Part X, line 26)		<u>1,000</u>		0							
Net Assets or	22 Net asse	ts or fund balances Subtract line 21 from line 20	16	6,242		157,070							
		gnature Block											
		perjury, I declare that I have examined this return, including accompanying schedules and stateme	ents, and to the b	est of my kn	owledge an	d belief, it is							
t	rue, correct, and o	omplete Declaration of preparer (other than officer) is based on all information of which preparer i	nas any knowledg	ge	·								
_		M. E land											
c:	• ;	Signature of Africer		Date									
	ייצ ן ייצ	Mary Graham President		7/	1611	12							
He	ere	+ - · · · · · · · · · · · · · · · · · ·											
		Type or print narge and title	I David	T	GZ Love								
		e preparer's name Preparer's signature	Date	Check	X i PII								
Pa	id	DAN PARSONS Dantamon	6-26	: /3 self-em		01418653							
Pre	eparer Firm's na	Parsons & Associates, CPAs	F	irm's EIN	<u> 26-</u> :	1865984							
Us	e Only	234 Fourth Ave N			<u></u>	-							
	Firm's ac	. Decembel in MM 27064	l F	Phone no	615-	794-4313							
Ma		ss this return with the preparer shown above? (see instructions)				Yes X No							
$\overline{}$		action Act Notice, see the separate instructions.			10	Form <b>990</b> (2012							
DA		·			1 U	417							

### Part IV Checklist of Required Schedules

				T .
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<del></del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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		Х
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			1
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		X
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		_X_
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Χ	
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		Х
С	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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	Х	L
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	_X_	<u> </u>
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X.
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		٠,
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			١.,
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4-		,,
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
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	ļ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<b></b>	Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	Ц	

Form 990 (2012) United Ways of Tennessee 62-1773407

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			-115
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
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		- 1	
	employees? If "Yes," complete Schedule J	23		_X_
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	ļ	- 1	
	through 24d and complete Schedule K If "No," go to line 25	24a		<u>X</u>
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			37
26	If "Yes," complete Schedule L, Part I	25b		<u>X</u>
20	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		1	v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		<u>X</u>
.,	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	ĺ		
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	i	_X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-21		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		ŀ	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	- 1		
	Part I	31		<u>X</u>
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		_X_
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		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	24		v
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	550		
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
97	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-55		- 21
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	ł		
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
<b>,</b> ,,	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
			000	

	Check if Schedule O contains a response to any question in this Part V			[]
	Check we concede a contains a response to any question in this rait v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			ĺ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			l
	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 1			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	<u> </u>
	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		X
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			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		X
D	If "Yes," enter the name of the foreign country.			l
5a	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		.,
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_5b		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		<del>                                     </del>
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	34		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		_	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ĺ
	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		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			l
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	<del>  "</del>		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109	98-C? 7h		<del> </del> -
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			1
	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		ĺ
9	Sponsoring organizations maintaining donor advised funds.	-		$\vdash$
a	Did the organization make any taxable distributions under section 4966?	9a		ĺ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			$\overline{}$
а	Initiation fees and capital contributions included on Part VIII, line 12			İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter			ĺ
а	Gross income from members or shareholders			Ì
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>-</b>
	Note. See the instructions for additional information the organization must report on Schedule O			ĺ
b	Enter the amount of reserves the organization is required to maintain by the states in which			l
	the organization is licensed to issue qualified health plans  13b			
C	Enter the amount of reserves on hand  [13c]  Did the assessments reserve any navements for indeer tanging convers during the tay year?	14a		V
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		X
D	HE 165. Has It High a FUTTI 720 to report these payments 111 No., provide an explanation in schedule O	י טודיו ן		4

Form 990 (2012)

615-791-1464

Franklin

and financial statements available to the public during the tax year.

organization ▶ United Way of Tennessee

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

209 Gothic Court

<u>TN</u> 37067

DAA

GE 1770-107 GG/20	,		
Form 990 (20	012) United Ways of Tennessee	62-1773407	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Findependent Contractors		Employees, and
·	Check if Schedule O contains a response to any que	estion 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	n 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 organizations compensated any current officer, director, or trustee (F) Name and Title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of box, unless person is both an from related other (list any officer and a director/trustee) organizations compensation hours for organization (W-2/1099-MISC) from the nstitutional trustee Highest Employe related (W-2/1099-MISC) organization organizations idual trustee est compensated byee and related below dotted organizations (1) Mary Graham 40.00 0.00 Χ President 99,500 0 (2) John McMillan 0.00 0.00 Χ Mkt Comm Chair 0 0 (3) Dawn Holley 0.00 0.00 Х 0 0 Director 0 (4) Stewart Clifton 0.00 Public Policy Chair 0.00 Х 0 (5) Lester Lattany 0.00 0.00 0 0 Capacity Bldg Co-Chr 0 (6) Penny Aviotti 0.00 0.00 Х 0 0 0 Member At Large (7) Eric Dewey 0.00 0 0.00 Х Director (8) Raquel Hatter 0.00 0.00 Х 0 0 0 Director (9) Linda O'Neal 0.00 0.00 X 0 0 0 Director (10) Jimmy Stone 0.00 0.00 0 0 Х 0 Director (11)Susan Goodman 0.00 0.00 Education Chair

Form 990 (2012)

Form 990 (2012) United War Part VII Section A. Officers						oyee	s, a	62-177 nd Highest Compensated	Employees (continued)			Page (
(A). Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than of box, unless person is both officer and a director/trustr				than c	h an from		(E) Reportable compensation from related organizations		(F) Estimated amount of other compensations	of Ion
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		from the organization and relate organization	on ed
(12)Don Witherspoon		-	-		H	-	_					<del></del> ·
	0.00						ŀ					
Director (13)CeeGee McCord	0.00	X	<del>                                     </del>	<del> </del>	-	<del> </del>		0	0			0
(13) Ceegee McCord	0.00			l								
Director	0.00	X						0	0			0
(14)Bryce Haugsdahl												
Claration.	0.00			٠,								
Chair (15)Rick Morrow	0.00	-	_	X	$\vdash$	-	-	0	0			0
(is)itteit illettew	0.00											
Past Chair	0.00	<u> </u>		Х	<u> </u>		L	0	0			0
(16)Eva Dillard	0.00											
Director	0.00			X				0				0
(17) Judy Fenton	0.00	<del> </del>	<del>                                     </del>		$\vdash$				0		<del></del>	0
. , , ,	0.00											
Secretary	0.00	_	_	X	ļ	<u> </u>		0	0			0
(18)Brian Hercules	0.00											
Nominations	0.00			X				0	0			0
(19)		1										
			İ	l								
1h Cub total	<u> </u>	1				<u> </u>	L_	99,500				
1b Sub-total c Total from continuation sheet	ets to Part VII.	Secti	on A	4				99,300				·
d Total (add lines 1b and 1c)	,						<b>&gt;</b>	99,500				
Total number of individuals (in				thos	e lis	ted a	bove	e) who received more than	\$100,000 in			_
reportable compensation from	tne organization		0						<del></del>			es No
3 Did the organization list any fo								oyee, or highest compensa	ted			V
employee on line 1a? If "Yes," 4 For any individual listed on line								n and other compensation	from the	F	3	<u> X</u>
organization and related organ										ŀ		🗸
individual  5 Did any person listed on line 1	a receive or acc	rue d	comp	oens	atıor	n fron	n an	y unrelated organization or	individual	-	4	X
for services rendered to the or	ganization? If "Y										5	X
<ul><li>Section B. Independent Contracto</li><li>1 Complete this table for your fix</li></ul>			tod i	ndo	2000	lont o	ontr	actors that received more t	than \$100,000 of			
compensation from the organi	zation Report c	ompe	ensa	tion	for t	ne ca	lenc	lar year ending with or with	in the organization's tax yea	ar.		
Name and	(A) business address						L	Descrip	(B) tion of services		Comp	(C) pensation
										$\longrightarrow$		
										$\longrightarrow$		
										ļ		
	<del></del>							<del></del>		-+		
2 Total number of independent of	contractors (incli	uding	but	not	lımite	ed to	thos	e listed above) who				
received more than \$100,000 c	or compensation	ı iron	ı <u>ı</u> me	org	anız	ation		<u> </u>	0		Form	990 (2012

ra	irt v		if Schedule (	on con	tains a	response	to any question in	this Part VIII.		(T)
`	•		·	·.	-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Grants	1a b	Federated can Membership d	. •	1a 1b		122,272				512, 513, 07 514
Contributions, Gifts, Grants and Other Similar Amounts	c d	Fundraising ev Related organ	izations	1c 1d				76 ST -	}	
outions, her Sim	e f	All other contribution and similar amounts	ns, gifts, grants,	1e		26,160				
Contrib and Ot	g h	Noncash contribution	ns included in lines 1a- es 1a-1f		; 	<u> </u>	148,432		- ·	
evenue	2a					Busn. Code		g , A	-	
ervice F	b c d									
Program Service Revenue	e f	All other progra	am service reve	nue						
P	g	Total. Add line	es 2a-2f			<u> </u>				
	3	and other simi				•	161	161		
	<b>4</b> 5	Royalties	nvestment of tax	-exemp		roceeds  Personal				
	6a b	Gross rents Less rental exps	(i) Real		(  )	ersona		A CONTRACTOR OF THE CONTRACTOR		
	c _d	Rental inc or (loss)  Net rental inco				<b>&gt;</b>				
	7a	Gross amount from sales of assets other than inventory	(i) Secunties		(11)	Other				
		Less: cost or other basis & sales exps Gain or (loss)								
		Net gain or (los				<b>•</b>				
enue			om fundraising eve	nts					-	
Other Revenue		See Part IV, line		a					276.27	
oth	c		cpenses (loss) from fund om gaming activitie		events	<b>•</b>		The state of the s		
		See Part IV, line Less direct ex	19	a b					,	
		Gross sales of	(loss) from gam f inventory, less	ing act	vities	<u> </u>			5	
		returns and all	goods sold	a b	entory				7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	
	11a		(loss) from sale	o UI INV	епоту	Busn. Code	The state of the s			
	b									
	d	All other reven				L			L.	
	е 12	Total. Add line		ne		<b>&gt;</b>	148,593	161		0
	12	rotal revenue	e. See instruction	ið.			140,393	101	<del></del>	<u> </u>

DAA

Form 990 (2012)

#### 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) Check if Schedule O contains a response to any question in this Part IX (A) Total expenses (B) Do not include amounts reported on lines 6b, (C) (D) Program service expenses Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV. line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 99,500 99,500 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include 8 3,440 3,440 section 401(k) and 403(b) employer contributions) 10,167 10,167 Other employee benefits 6,609 6,609 10 Payroll taxes Fees for services (non-employees). a Management Legal 6,000 Accounting 6,000 C Lobbying ------ -Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 1,037 (A) amount, list line 11g expenses on Schedule O) ,037 965 8,965 Advertising and promotion 12 905 905 Office expenses 13 14 Information technology Royalties 15 16 Occupancy 225 225 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 5,711 711 Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 159 159 23 Insurance Other expenses Itemize expenses not covered 24 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) 803 683 Grant Expense 505 505 Miscellaneous 401 401 Telephone 340 340 Membership Dues d 998 998 All other expenses е 157. 765 151 645 6,120 0 Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 115,732 Cash-non-interest bearing 105,659 50,000 Savings and temporary cash investments 2 50,000 2 3 Pledges and grants receivable, net Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other 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). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 846 956 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 664 10b 10c 455 b Less accumulated depreciation Investments—publicly traded securities 11 11 Investments-other securities See Part IV, line 11 12 12 Investments-program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets See Part IV, line 11 15 15 167,242 157. 070 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 000 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 000 0 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 166,242 157,070 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 **Assets or Fund** Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 ž 32 166,242 33 Total net assets or fund balances 33 Total liabilities and net assets/fund balances

-orm	990 (2012) United Ways of Tennessee 62-1773407			Pa	ge <b>12</b>
Pa	rt 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	1	48,	593
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	57,	765
3	Revenue less expenses. Subtract line 2 from line 1	3		-9,	$\overline{172}$
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	66,	242
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	, 1	57,	070
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	_		1	
	Schedule O		1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				1
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both			1	1
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		İ	1	}
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				ì
	the Single Audit Act and OMB Circular A-133?		3a		X
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	<u></u>	
			F	orm <b>99</b> 6	0 (2012)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

**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

2012

Open to Public Inspection

Employer identification number

		<del></del>			or remessee						62-	<u>-177</u>	<u>3407</u>		
	art I				Status (All organizat					art.) Se	e inst	ruction	ns.		
The	orgai				e it is: (For lines 1 through		_		•				_		
1		A church, cor	nvention of church	es, or ass	ociation of churches desc	ribed ii	n section	170(b)(1	1)(A)(i).						
2		A school des	cribed in section	170(b)(1)(	A)(ii). (Attach Schedule E	:)									
3		A hospital or	a cooperative hos	pital servi	ce organization described	ın sec	tion 170	(b)(1)(A)(	iii).						
4		A medical res	search organizatio	n operate	d in conjunction with a hos	spital d	escribed	ın sectio	n 170(b	)(1)(A)(i	ii). Ente	er the h	ospital's	name,	
		city, and state											•	ŕ	
5		An organizati	on operated for th	e benefit d	of a college or university of	wned o	or operate	ed by a g	ovemme	ental uni	t descri	bed in			
			b)(1)(A)(iv). (Com												
6		A federal, sta	ite, or local govern	ment or g	overnmental unit describe	ed in se	ection 17	'0(b)(1)(A	)(v).						
7					substantial part of its sup					from the	genera	al oublic	•		
	J		section 170(b)(1)			•	•				3				
8					170(b)(1)(A)(vi). (Complet	e Part	11.)								
9	X	-			1) more than 33 1/3% of it		•	contributi	ons me	mbershi	n fees	and ord	199		
					npt functions—subject to							-	,,,,		
					nd unrelated business tax										
			-		0, 1975 See section 509		•			,,					
10	П	•	-		exclusively to test for publ				•						
11	H	_	_		exclusively for the benefit		•				out the	e			
		•	_	•	ed organizations describe					-			1		
					he type of supporting orga										
		a Type		Гуре II	c Type III-Fu			-	d l	—, Ť		on-funct	tionally in	tegrated	
е				•	janization is not controlled		-		one or m					nogratou	
_		-			er than one or more public							•			
		or section 50	•		·	,	•	,					.,		
f				ritten dete	ermination from the IRS th	at it is	a Type I.	Type II.	or Type	III saaa	ortina				
٠		•	check this box				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. , ,							f 1
g		•		e organiza	tion accepted any gift or o	ontribu	ition from	any of th	ne						Li
3		following per		J	, ,,,			•							
		• .		directly co	ontrols, either alone or tog	ether v	vith perso	ons descr	ibed in (	ıı) and				Yes	No
		• • •	-	•	supported organization?		•		•	,			ſ.	11g(i)	
			member of a pers	-										11g(i)	$\neg$
		• •	· ·		described in (i) or (ii) abov	e?								11g(III)	
h		• •	· · · · · · · · · · · · · · · · · · ·	-	he supported organization									//	
		e of supported	(II) EIN		(III) Type of organization		(IV) Is the c	organization	(v) Did y	ou notify	(vi)	ls the	(vli) Ar	mount of mon	netary
		anization	, ,		(described on lines 1-9		ın col (ı) lı:	sted in your		ization in	organizat		` `	support	,
					above or IRC section (see instructions))		governing	document?	col (i)	oryour port?		zed in the S ?			
					(ace instructional)		Yes	No	Yes	No	Yes	No			
(A)															
` ′															
(B)															
. ,			1												
(C)	•														
(-,															
(D)															
<b>,</b> -,														_	
(E)															
							4	3 as "				_			

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.)

b 33 1/3% support test—2011. 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  10%-facts-and-circumstances test—2012. 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—2011. 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  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	Sec	tion A. Public Support							
Griss, grants, contributions, and membership flees received. (Do not include any "unusual grants.")  Tax revenues levad for the organization's benefit and either paid to or expended on its behalf and either paid to or expended on the behalf and organization without charge organization without charge organization without charge organization without charge organization without charge organization of total contributions by each person (other than a governmental unit or public support. Sulfract line of producted on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support. Sulfract line of from line 4. Section B: Total Support  Calendar year (or fiscal year beginning in) > (o) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Organization organization	Caler	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	12	(f) Total
organization's benefit and either paid to or expended on its behalf of or expended on the behalf of or expended on the behalf of the value of services or facilities furnished by a governmental unit to the organization without charge of the properties of the prope	1	membership fees received. (Do not							
turnshed by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Callendar year (or fiscal year beginning in) ► Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar societies. 9 Not income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assests (espain in Part IV). Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 950 is for the organization first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, chaek this box and stop here.  Section C. Computation of Public Support Percentage  12 Public support percentage from 2011 Schedule A, Part II, line 14 Sa 33 1/3% upport est—2012. 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 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in	2	organization's benefit and either paid							
5 The portion of total contributions by each person (other than a governmental unt or publicly supported organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  5 Public support. Subtract line 5 from line 4  Section B: Total Support  Callendar year (or fiscal year beginning in)   (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 7  Amounts from line 4  6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar sources  9 Net income from unrelated business activities, whether or not the business is regularly carned on  10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc (see instructions)  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  Section C: Computation of Public Support Percentage  Section C: Computation of Public Support Percentage  Section C: Computation of Public Support Percentage  Section C: Computation of Public Support Percentage  14 Public support percentage from 2011 Schedule A, Part III, line 14  15 years and the organization metes the "facts-and-circumstances" test, check this box and stop here. 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  17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumst	3	furnished by a governmental unit to the							
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)  8 Public support. Subtract line 5 from line 4  Section B: Total Support  Calendar year (or fiscal year beginning in) > (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total   9 Amounts from line 4  9 Gross income from interest, dividends, payments received on securities loans, reints, royalties and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on loss from the sale of capital assets (Explain in Part IV.)  10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  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 5top here  9 Section C. Computation of Public Support Percentage  9 Public support percentage from 2011 Schedule A, Part II, line 14  14 Ye Public support percentage from 2011 Schedule A, Part II, line 14  15 a 33 1/3% support test—2012. 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  15 a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 15 in 0% 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the	4	Total. Add lines 1 through 3							
line 1 that exceeds 2% of the amount shown on hise 11, column (f)  8  Public support. Subtract line 5 from line 4  Section B. Total Support  7  Amounts from line 4  8  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  9  Net income from unrelated business activities, whether or not the business is regularly carned on  10  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11  Total support. Add lines 7 through 10  22  Gross receipts from related activities, etc (see instructions)  12  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 2012 (line 6, column (f) divided by line 11, column (f))  15  Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))  16  Public support percentage for 2012 (line 6, column (f) divided by line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 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%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 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%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 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 or	5	each person (other than a governmental unit or publicly					£.,		
Section B. Total Support  Calendar year (or fiscal year beginning in)   Amounts from line 4  Gross income from increast, dividends, payments received on securities loans, prents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  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  Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))  Public support percentage from 2011 Schedule A, Part II, line 14  153 31/3% support test—2012. If the organization did not check thos 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  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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the orga		line 1 that exceeds 2% of the amount					- r.		
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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—2011. 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  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	17a	10%-facts-and-circumstances test—201	2. If the organization	on did not check a	box on line 13, 16	Sa, or 16b, and line	14 is		
organization  b 10%-facts-and-circumstances test—2011. 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  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		10% or more, and if the organization meet	s the "facts-and-ci	rcumstances" test	, check this box an	d stop here. Expl	aın ın		
b 10%-facts-and-circumstances test—2011. 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  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		•	cts-and-circumsta	nces" test. The org	ganization qualifies	s as a publicly supp	ported		▶ [
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> .  Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	b	10%-facts-and-circumstances test—201	1. If the organizati	on did not check a	box on line 13, 16	Sa, 16b, or 17a, an	d line		
Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see									
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		_							
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		supported organization							<b>▶</b> [~
instructions ► [	18	Private foundation. If the organization did	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee		
		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.)

Sec	tion A. Public Support	quality direct ti	ic tests listed b	elow, please co	implete Fait II.	)	
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	250,464	200,866		162,325	148,432	1,110,599
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		638	1,196	487	161	2,482
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	250,464	201,504	349,708	162,812	148,593	1,113,081
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		_				
8	Public support (Subtract line 7c from line 6.)					-	1,113,081
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	250,464	201,504	349,708	162,812	148,593	1,113,081
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						· · · · · · · · · · · · · · · · · · ·
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,				1		
	and 12)	250,464	201,504	349,708	162,812	148,593	1,113,081
14	First five years. If the Form 990 is for the	-	t, second, third, foi	urth, or fifth tax yea	r as a section 501	(c)(3)	▶ [1]
800	organization, check this box and stop her stion C. Computation of Public Su		lane		<del></del>		
	Public support percentage for 2012 (line 8			n (f))		15	100.00%
15 16	Public support percentage from 2011 Sch			(17)		16	100.00%
	tion D. Computation of Investme						100.00 %
17	Investment income percentage for 2012 (I			, column (f))		17	%
18	Investment income percentage from 2011					18	%
19a	33 1/3% support tests-2012. If the orga	nization did not che	eck the box on line				
ь	17 is not more than 33 1/3%, check this be 33 1/3% support tests—2011. If the orga						<b>▶</b> [X]
,	line 18 is not more than 33 1/3%, check th						▶ [`]
20	Private foundation. If the organization did						<u> </u>

Page 4

Schedule A (Form 990 or 990-EZ) 2012 United Ways of Tennessee 62-1773407

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).

#### SCHEDULE C (Form 990 or 990-EZ)

### Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2012

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

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

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

Nan	me of organization  Employer identification of Theorem and the state of the state o							
	United Ways of Tenne			62-17734	07			
	t I-A Complete if the organization is exen			n 527 organizatio	on			
1	Provide a description of the organization's direct and indire	ect political campaign activities	in Part IV.					
2	Political expenditures			▶ \$				
3	Volunteer hours							
.— ∠Paı	t I-B Complete if the organization is exen	npt under section 501(c	)(3).					
1	Enter the amount of any excise tax incurred by the organiz	<del></del>		<b>▶</b> \$				
2	Enter the amount of any excise tax incurred by organization	on managers under section 495	5	<b>▶</b> \$				
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No			
4a	Was a correction made?				Yes No			
b	If "Yes," describe in Part IV.							
Pa	t I-C Complete if the organization is exen	npt under section 501(c	), except secti	on 501(c)(3).				
1	Enter the amount directly expended by the filing organization	on for section 527 exempt func	tion					
	activities			▶ \$				
2	Enter the amount of the filing organization's funds contribu	ited to other organizations for s	ection					
	527 exempt function activities			<b>▶</b> \$				
3	Total exempt function expenditures. Add lines 1 and 2 En	ter here and on Form 1120-PO	L,					
	line 17b			▶ \$				
4	Did the filing organization file Form 1120-POL for this year	r			Yes No			
5	Enter the names, addresses and employer identification n	umber (EIN) of all section 527 p	oolitical organizatio	ns to which the filing				
	organization made payments For each organization listed	, enter the amount paid from th	e filing organization	n's funds Also enter				
	the amount of political contributions received that were pro-	omptly and directly delivered to	a separate political	organization, such				
	as a separate segregated fund or a political action commit	tee (PAC). If additional space is	s needed, provide	nformation in Part IV				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
				filing organization's	contributions received and			
				funds. If none, enter -0-	promptly and directly delivered to a separate			
					political organization If			
					none, enter -0-			
(1)								
					<del></del>			
(2)								
(3)								
				<u>-</u>				
(4)								
(5)								
(6)								
		1	]					

Sched		l Ways of Tennessee	62-1773407	Page <b>2</b>				
Pa		zation is exempt under section 501(c)	(3) and filed Form 5768 (elec	tion under				
	<u>section 501(h)).</u>							
A (	Check ▶ ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's							
_	name, address, EIN, expenses, and share of excess lobbying expenditures).							
B (	Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.							
		bying Expenditures	(a) Filing	(b) Affiliated				
	(The term "expenditures" r	means amounts paid or incurred.)	organization's totals	group totals				
1a	Total lobbying expenditures to influence pu	iblic opinion (grass roots lobbying)						
b	Total lobbying expenditures to influence a	legislative body (direct lobbying)	922					
C	Total lobbying expenditures (add lines 1a a	and 1b)	922					
d	Other exempt purpose expenditures							
е	Total exempt purpose expenditures (add file	922						
f	Lobbying nontaxable amount Enter the an	nount from the following table in both						
	columns.							
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is.						
	Not over \$500,000	20% of the amount on line 1e						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000						
L	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000						
	Over \$17,000,000	\$1,000,000						
g	Grassroots nontaxable amount (enter 25%	46						
h	Subtract line 1g from line 1a. If zero or less	0						
i	Subtract line 1f from line 1c If zero or less	, enter -0-	738					
j	If there is an amount other than zero on eif	her line 1h or line 1i, did the organization file Form	1 4720					
	reporting section 4911 tax for this year?			Yes X No				

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

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	( <b>d)</b> 2012	(e) Total	
2a Lobbying nontaxable amount				184	184	
b Lobbying ceiling amount (150% of line 2a, column(e))	THE THE ME CONTROL OF	and the second			276	
c Total lobbying expenditures				922	922	
d Grassroots nontaxable amount				46	46	
e Grassroots ceiling amount (150% of line 2d, column (e))		The second secon	For the building of the control of t		69	
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Current year

**b** Carryover from last year

c Total

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information

Schedule C, Part II-A, Explanation of Four Year Averaging Event is not held each year.

2b

2c 3

Schedule C (Form 990 or 990-EZ) 2012 United Ways of Tennessee

62-1773407

Page 4

Part IV Supplemental Information (continued)

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

OMB No 1545-0047

2012

Open to Public

Inspection Name of the organization Employer identification number United Ways of Tennessee 62-1773407 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 XIII, 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 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. \$ Revenues included in Form 990, Part VIII, line 1

	adile D (Form 990) 2012 OTTICEO W						//3407			Page 2
Pa	rt III Organizations Maintainin								(continue	d)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ls, check	any of the fol	lowing that ar	e a signific	cant use of its			
а	Public exhibition	d∏	Loan or	exchange pro	arams					
b	Scholarly research	e 🗂	Other		<b>3</b>					
С	Preservation for future generations	_								
4	Provide a description of the organization's of	collections and explain	n how the	ev further the	organization's	exemnt n	umose in Par			
	XIII.			o, varaior aio	organization c	o oxempt p	dipose iii i ai	•		
5	During the year, did the organization solicit	or receive donations	of art bis	storical treasu	ree or other s	eimilar				
•	assets to be sold to raise funds rather than								Yes	[ ]
Pa	art IV Escrow and Custodial Ar						Yes" to For	m 990		No
	line 9, or reported an amou				nzanon an	JWC100	103 10101	111 330	, raitiv,	
1a	Is the organization an agent, trustee, custoo				or other asset	e not	<del></del>			
	included on Form 990, Part X?	dian or outer intermet	Jidiy ioi (	contributions c	o other asset	5 1101			[] v	<u>г</u> тъ.
h	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowana t	abla					Yes	∐ No
J	ii res, explain the allangement in Falt All	i and complete the ic	Mowing (	aule.					Amount	
_	Beginning balance						10		Amount	
	Additions during the year						1c			
	Distributions during the year						1d			
-							1e			
1	Ending balance	F 000 D-4V lim	- 040				1f			<del></del>
	Did the organization include an amount on I					4 VIII			∐ Yes	∐ No
	If "Yes," explain the arrangement in Part XII  If "Yes," explain the arrangement in Part XII  Endowment Funds. Comp						Dort IV line	10		<u> </u>
Pe	it v Endownient Funds. Com				(c) Two year				(1) 5	
• •	B	(a) Current year	- "	) Pnor year	(c) Two year	is back	(d) Three years	back	(e) Four yea	irs back
	Beginning of year balance									
	Contributions		<del> </del>	<del></del>	<del> </del>				<del> </del>	<del></del>
C	Net investment earnings, gains, and				ţ					
	losses		<del> </del> -						<b></b> -	<del></del> -
	Grants or scholarships								<del> </del>	
е	Other expenditures for facilities and									
	programs		<del> </del>						<del> </del> -	
T	Administrative expenses		<del> </del>		<del></del>					
g	End of year balance		<u> </u>		<u> </u>				L	
2	Provide the estimated percentage of the cu		e (line 1	g, column (a))	neid as:					
a	Board designated or quasi-endowment	%								
b	Permanent endowment ▶ %	0/								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the poss	ession of the organiza	ation tha	t are neid and	administered	for the			[v	Т.
	organization by								Ye	s No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organization								3b	
4	Describe in Part XIII the intended uses of the				- 10					
<u>. P</u>	art VI Land, Buildings, and Equ						<del></del>			
	Description of property	(a) Cost or other		(b) Cost or o	1		ccumulated		(d) Book valu	е
		(investment)	'	(oth	er)	der	orecration	+		
1a	Land						-			
b	Buildings							<del></del>		
С	Leasehold improvements	ļ			1 2 2			<del>. </del>		
d	Equipment	ļ. <u></u>			1,049		59	4		<u>455</u>
	Other			l						
Tota	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, colu	mn (B), line 10	D(c) )			<u>-</u>		<u>455</u>
								_		

DAA

Part VII	Investments—Other Securities. See Form 990	, Part X, line 12.		
•	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	ar market value
(1) Financial	derivatives			
	eld equity interests		<u> </u>	
(3) Other				<del></del>
(A)				
(B)				<del></del>
(C)				
(D)			<del> </del>	
(E)				······
(F)				
(G)				
(H)				
(1)				
Total. (Colum	n (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
		ļ	Cost or end-of-year	ar market value
(1)				
(2)				
(3)				<del></del>
				<del></del>
(4)			<del></del>	<del></del>
(5)		<u> </u>		
(6)				
_(7)				
(8)	<u> </u>	<u> </u>	<del></del>	
(9)				<del></del>
(10)		· · · · · · · · · · · · · · · · · · ·		
	in (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		<u>-</u>
Part IX	Other Assets. See Form 990, Part X, line 15.			<del></del>
	(a) Description		· <del></del>	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				-
(10)	- /h) Corm 000 Bort V col /R) Ino 15		<b>•</b>	
	on (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line 25		<del></del>	<u> </u>
Part X	···			
<u>1.</u>	(a) Description of liability	(b) Book value	<b></b>	
(1) Federa	Income taxes		<b>-</b>  ;	
(2)			-	-
(3)			<b>⊣</b> • ,	
(4)				-
(5)				-
(6)				
(7)				
(8)				
(9)		<u> </u>		
(10)				
(11)	on (h) must equal Form 990. Part X. col. (B) line 25.)	<del> </del>	<b>→</b>	
iotal. (Colum	on (b) must equal Form 990, Part X, col (B) line 25.)  SC 740) Footnote In Part XIII, provide the text of the footnote to	the organization's finan	rial statements that reports the	organization's
2 EIN /8 /49	SC: 740) Footpote in Part XIII. provide the text of the footpote to	o une organization s finan	uai siaiemenis inal repons liik	organization 5

liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 United Ways of Tennessee		1773407	Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenu	ue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	148,593
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	148,593
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	148,593
Pa	rt XII   Reconciliation of Expenses per Audited Financial State	ments With Expen	ises per Return	
1	Total expenses and losses per audited financial statements		1	157,765
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	157,765
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	· •		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	157.765

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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part X - FIN 48 Footnote

**Supplemental Information** 

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and Tennessee state law.

The accounting standard on accounting for uncertainty in income taxes addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under that guidance, the Organization may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities based on the technical merits of the position. Examples of tax positions include the tax exempt status of the Organization and various positions related to the potential sources of unrelated business taxable income (UBIT). The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50%

likelihood of being realized upon ultimate settlement. There were no unrecognized tax benefits identified or recorded as liabilities for fiscal year 2012 and 2011.

SCHEDULE O' (Form 990' or 990-EZ)

Department of the Treasury

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.

2012
Open to Public Inspection

Internal Revenue Service
Name of the organization

United Ways of Tennessee

Employer identification number 62-1773407

Form 990 - Organization's Mission or Most Significant Activities
United Ways of Tennessee is a statewide organization providing member
support services to 38 United Ways across the state. We accomplish our
mission through advocacy, collaboration and collective action that provides
solutions to our states most critical needs, such as early education,
infant mortality, creating economic opportunity and efforts to provide
assistance to vulnerable, sick and aging populations.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 A complete copy of the IRS Form 990 is provided electronically to the Executive Committee for their review and corrections prior to the filing of the return with the Internal Revenue Service.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Individuals are to report any conflicts or potential conflicts to the board
members.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
The Board establishes goals for the CEO and the Executive Committee reviews
their performance and makes a compensation recommendation to the Board at
the December meeting. Informal benchmark information on CEO compensation
at other United Way state associations are considered when making the
recommendations.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Schedule O (Form 990 or 990-EZ) (2012)

Page 2

Name of the organization
United Ways of Tennessee

Employer identification number

62-1773407

The organization will post it's current year's Form 990 on it's website and make available to the public the governance documents and other information upon request.