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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)

OMB No 1545-0047

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

Open to Public Inspection

	Of the	e 2012 Caleridar year, or tax year beginning	anding							
В	heck if	C Name of organization		D Employer identific	cation number					
	pplicab	UNITED WAY OF WEST CENTRAL								
	_Addre	e MISSISSIPPI, INC.								
	Name chang	Doing Business As	_	64-0	330259					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	- 					
	Termi	P.O. BOX 203		636-1733						
	Amen	City, town, or post office, state, and ZIP code		G Gross receipts \$ 1,413,041.						
	Application	VICKSBURG, MS 33101		H(a) Is this a group re	turn					
	pendi	F Name and address of principal officer:BARBARA TOLLIVER		for affiliates?	Yes X No					
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No					
1 7	ax-ex	empt status. X 501(c)(3) 501(c) ()	r 🔲 527	If "No," attach a	list. (see instructions)					
JI	Vebsi	te: ► N/A		H(c) Group exemption	number 🕨					
KF	orm o	forganization: X Corporation Trust Association Other	L Year	of formation: 1953 N	State of legal domicile: MS					
	art I	Summary								
	1	Briefly describe the organization's mission or most significant activities: HEALT	'H & H	UMAN SERVIC	ES					
翼										
<u> </u>	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets					
ాక్ట	3	Number of voting members of the governing body (Part VI, line 1a)		3	25					
- শ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	25					
⋥	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	6					
;= <u>;</u>	6	Total number of volunteers (estimate if necessary)		6	0					
<u> </u>	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
Ž	b	Net unrelated business taxable income from Form 990-T, line 34		. 7ь	0.					
ReveSIGANINEDIVITIELA GOBLANG				Prior Year	Current Year					
10	8	Contributions and grants (Part VIII, line 1h)		1,033,233.	952,553.					
S.	9	Program service revenue (Part VIII, line 2g)		40,153.	41,270.					
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		100,858.	78,162.					
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		67,352.	104,734.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,241,596.	1,176,719.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		713,782.	673,366.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		245,651.	240,040.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
ğ.	b	Total fundraising expenses (Part IX, column (D), line 25) 194,19	91.							
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		421,220.	373,175.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,380,653.	1,286,581.					
	19	Revenue less expenses. Subtract line 18 from line 12		<139,057.	> <109,862.>					
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)		2,818,413.	2,770,148.					
ASB	21	Total liabilities (Part X, line 26)	3 [835,790.	895,402.					
캺	22	Net assets or fund balances Subtract line 21 from line 20 19 10 10 10 10 10 10 10 10 10 10 10 10 10	181	1,982,623.	1,874,746.					
Pa	art II	Signature Block	191							
Und	er pena	alties of perjury, declare that I have examined this return, including accompanying schedules	andstatem	ents, and to the best of my	knowledge and belief, it is					
true,	, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge.						
		V/durana feliner	(4/18/2	013					
Sig	n	Signature of officer		Date						
Her	е	BARBARA TOLLIVER, PRESIDENT								
		Type or print name and title								
		Print/Type preparer's name Preparer's signature		Date Check	PTIN					
Paid	t	NATHAN CUMMINS	0	6/14/13 self-employe	D00986272					
Prep	arer	Firm's name MAY AND COMPANY, LLP		Firm's EIN	64-0900153					
Use	Only	Firm's address POST OFFICE BOX 821568								
		VICKSBURG, MS 39182-1568		Phone no.	601)636-4762					
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					
	01 12-	-	ns.		Form 990 (2012)					

Form	990 (2012) MISSISSIPPI	, INC.			64	-0330259	Page 2
Pa	t III Statement of Program Service						_
	Check if Schedule O contains a response	to any ques	tion in this Part III	·······			L
1	Briefly describe the organization's mission:	י מכן איי	י וזכיבים בייסם	TABTOR	וכ עשאד אווי אווי	LITTLEANT	
	RAISE AND ALLOCATE FUNDS SERVICES	TO BE	OSED FOR	VARIOU	ONE UTTHE	HUMAN	
	BERVICED						
							···
2	Did the organization undertake any significant p	rogram servi	ices during the year	which were	not listed on		
	the prior Form 990 or 990-EZ?	•				Yes	X No
	If "Yes," describe these new services on Schedu	ule O.					
3	Did the organization cease conducting, or make		changes in how it co	onducts, any	program services?	Yes	X No
	If "Yes," describe these changes on Schedule C						
4	Describe the organization's program service acc				=		
	Section 501(c)(3) and 501(c)(4) organizations are		report the amount	of grants and	dallocations to others, th	e total expenses,	and
4a	revenue, if any, for each program service reports (Code) (Expenses \$ 888,			673	, 366 .) (Revenue \$		
4a	(Code) (Expenses \$ 888, RAISE & ALLOCATE FUNDS T					ти с нітма	NI)
	SERVICES	O ORGI		WIII CII	TROVIDE HERE	<u> </u>	
							
							<u> </u>
					·		
							
						-	
							
4b	(Code) (Expenses \$	·····	cluding grants of \$) (Revenue \$		<u> </u>
	/(LAPONSES #		Sidding grants of ψ) (Hoveride 4		
					·····		
4c	(Code) (Expenses \$	inc	cluding grants of \$) (Revenue \$)
							
	· · · · · · · · · · · · · · · · · · ·						
		<u> </u>					
							-
4d	Other program services (Describe in Schedule C))					
		grants of \$) (Rev	enue \$)	
<u>4e</u>	Total program service expenses ▶	888,	145.				000 (25 : 5:
						Form 9	90 (2012)

Form 990 (2012) MISSISSIPPI, INC.
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_	X_	L
2	Is the organization required to complete Schedule B, Schedule of Contributors	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_	L	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		_X_
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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_		<u> </u>
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		<u> </u>
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	X	
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		<u> </u>
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		<u> </u>
a	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			77
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		<u>X</u>
•	the organization's separate of consolidated financial statements for the tax year include a footnote that adoresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		v	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Х	
120	Schedule D, Parts XI and XII	10-	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a_		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
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,	170		
	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 organization	.,,,,,		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
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		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	17		X
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		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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2012)

Page 4

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 17 !! "Yes," complete Schedule I, Parts I and II 21 X 22				Yes	No
United States on Part IX, column (A), line 17 // Yes, *complete Schedule I, Parts I and II column (A), line 27 // Yes, *complete Schedule I, Parts I and II column (A), line 27 // Yes, *complete Schedule I, Parts I and III column (A), line 27 // Yes, *complete Schedule I, Parts I and III column (A), line 27 // Yes, *complete Schedule I, Parts I and III column (A), line 27 // Yes, *complete Schedule I, Parts I and III column (A), line 27 // Yes, *complete Schedule I, Parts I and III column (A), line 28 // A Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If *Yes, *answer lines 24 through 24d and complete Schedule I, Part I in the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? 24d	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		163	140
22 Dut the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. column (A), the 2? If "Yes," complete Schedule I, Parts I and IX. 22 X Dut 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 IX. If Yes, complete Schedule IX. If Yes, 'complete Schedule IX. If Yes, 'complete Schedule IX. If Yes, 'complete Schedule IX. If Yes, 'ormplete Schedule IX. If Yes, 'complete Sch	~ '		21	x	
column (A), line 27 if "Yes," complete Schedule i, Parts I and III 20 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, of 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I and 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 24 through 24d and complete Schedule I, I'm?, go to the organization inviset amy proceeds of tax exempt bonds beyond a temporary period exception? 24d	22				
30 bit 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 X X 240 bit the organization have a tax-exempt bond is sue with an outstanding principal amount of more than \$100,000 as of the lest 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 b D dit the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d D dit the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d D dit the organization are set as an "on behalf of" issuer for bonds outstanding at any time during the year? d D dit the organization are ware that it engaged in an excess benefit transaction with a disqualified person during the year? d D dit the organization are of the organizations. D dit the organization is prore Forms 990 or 990,E27 If "Yes," complete Schedule L, Part II D dit the organization are of the organization is tax year? If "Yes," complete Schedule L, Part IV and the organization reverse of the organization of the organization is the end of the organization are assistance to an officer, director, trustee, exp employee, autistantial contribution of organization receive of indirect owner? If "Yes," complete Schedule L, Part IV d A entity of which a currier of form		· · · · · · · · · · · · · · · · · · ·	22		v
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Schedule J 24 Dd 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 D Dd the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? D Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-evempt bonds? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding as of the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D Dd the organization act as an "on behalf of" issuer for bonds outstanding as of the end of the organizations. D Dd the organization or behalf of organization and the service of the preson outstanding as of the end of the organization and or behalf or or other assistance to an officer, director, trustee, key employee, highest competes of any of these persons? If "Yes," complete Schedule L, Part II" D Dd the organization party to a business transaction with one of the following parties (see Schedule L, Part IV and the preson of the presons? If "Yes," complete Schedule L, Part IV and Part IV with a formal part of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and P				j	
24a Dit 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds event any time during the year? of the complete Schedule L, Part I and disqualified person during the year? If "Yes," complete Schedule L, Part I as the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I as the transaction has not been reported or any of the organizations prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I are schedule L, Part I as the transaction has not been reported or any of the organization spinor Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II are schedule L, Part II ar			23		Y
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 b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization acit as an "on behalf of" issuer for bonds outstanding at any time during the year? 25S Section 501(c)(3) and 501(c)(4) organizations. Did the organization is the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization of the organization of professions of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27D Did the organization provide a grant or other assistance to an officor, director, truste, bey employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part IV and the organization provide a grant or other assistance to an officor, director, truste, bey employee, or do a 35% controlled entity or family member of a current or former officer, director, truste, or key employee, or a family member of a current or former officer, director, truste, or key employee? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non cash co	24a				
Schedule K. If "No.", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization mantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization cat as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the droganization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization acts 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 or breat and that the transaction has not been reported on any of the organization provide and that the transaction has not been reported on any of the organization provide and that it the transaction has not been reported on any of the organization provide and that the transaction has not been reported on any of the organization provide any of the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualified person in a prior year, and that the transaction as any organization expende 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 organization provide exchedule Schedule L. Part IV Did the organization applicable filling thresholds, conditions, and exceptions? Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L. Part IV Did the organization receive con			ļ		
b Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 255 Section 501((s)) and 501((s)) are 501			242		x
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a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? 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 c Enter the amount of reserves on hand 13b 13b 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	_		g the year?		
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c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15a X 15a X 15a X 15a X 15a X 15a Y 15a X	a				
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				+	~
					Δ.
	0	The rest has trilled a Form (20 to report these payments (11 No., provide an explanation in Schedule O			(2012)

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.

<u> </u>	Check if Schedule O contains a response to any question in this Part VI		<u></u>	X
Sec	tion 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 25			
	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 25			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>ra</u>		
_	persons other than the governing body?	76		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
	The governing body?	_	v	
	·	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
C	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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	Х	
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		_X_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		Х
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?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
	Other officers or key employees of the organization	15b	X	
	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		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ioa		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	404		
Sec	tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed MS		_	
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) a	vallab	ie	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	l fınan	cıal	
	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	on. 🕨	٠	
	BARBARA TOLLIVER - 601-636-1733			
48844	P.O. BOX 203; VICKSBURG, MS 39181			

232000 12-10-12 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.

(A) Name and Title	(B) Average hours per week	(C) Positio (do not check mor box, unless persor officer and a direct				than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensatio from the organization and related organizations
1) BARBARA TOLLIVER	40.00							F0 210		_
RESIDENT	0.00					i		58,312.	0.	
2) SEE ATTACHED SCHEDULE ALL OTHER	0.00							0.	0.	(
			•							
	:									
		<u></u>	<u> </u>							
										!
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							1			

MISSISSIPPI, INC.

Part VII Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per week (list any	(do box offic	not c	(C Pos heck sa pe	C) Ition more rson		one h an	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amount of other compensation		
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organization (W-2/1099-Mis		fr org an	om th anızat d relat	e cion ced
		ļ ——											
											<u> </u>		
											<u></u>		
				-									
												···	
1b Sub-total c Total from continuation sheets to Part VI	I, Section A				-	>		58,312. 0.		0. 0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d at	oove	e) wh	no re	58,312. eceived more than \$100	,000 of reportab	0. le			0.
3 Did the organization list any former officer,	director, or tru	ıstee	e ke	v en	nplo	ovee	or l	highest compensated ei	mplovee on			Yes	No
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su	uch individual										3		X
and related organizations greater than \$150Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	te S	Sche	edule	J f	or such individual			4		Х
rendered to the organization? If "Yes," comp Section B. Independent Contractors											5		Х
Complete this table for your five highest couthe organization. Report compensation for the organization.										pensa	ation f	rom	
(A) Name and business	address	NC	NE	:				(B) Description of s	ervices	С	(C ompe) nsatio	n _
							_						
	.						_						
						=							
2 Total number of independent contractors (ii	ncludina hut n	ot lir	nited	d to	tho	se lis	ted	above) who received m	ore than			_	
\$100,000 of compensation from the organiz						0					Form	<u> </u>	0010

Form 990 (2012) MISSISSIPPI, INC.
Part VIII Statement of Revenue

		Check if Schedule O cont	tains a response	to any question i	n this Part VIII	<u> </u>		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a					
er e	b	Membership dues	. 1b					
s, G	С	Fundraising events	1c					
Sift ar	d	Related organizations	1d					
in.	е	Government grants (contribut	tions) 1e	7,075.				
tior S r	f	All other contributions, gifts, gran	its, and					
E P		sımılar amounts not ıncluded abo	ve 1f	945,478.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 0	h	Total. Add lines 1a-1f			<u>952,553.</u>			
				Business Code				
Se	2 a	CFC ADMINISTRAT	IVE	900099	41,270.			41,270.
er.	b							<u> </u>
Program Service Revenue	C							
Re	d							
) 	е			000000				
-		All other program service reve	enue	900099	44 050			
\rightarrow		Total. Add lines 2a-2f		• • • • • • • • • • • • • • • • • • •	41,270.	,		
]	3	Investment income (including	dividends, inter	est, and	60 720			60 730
i		other similar amounts)			69,729.			69,729.
	4	Income from investment of ta	x-exempt bond p	oroceeas -				
	5	Royalties .	() Dool	(v) Daves and				+
	6 -	Crees rents	(i) Real	(II) Personal	,			
		Gross rents					•	1
		Less: rental expenses			,			1
		Rental income or (loss) Net rental income or (loss)	Ł	-				1
		Gross amount from sales of	(ı) Securities	(II) Other	·			
	, a	assets other than inventory	244,755.					
	h	Less cost or other basis	244,733					
	J	and sales expenses	236,322.					
	c	Gain or (loss)	8,433.					
		Net gain or (loss)	<u> </u>		8,433.			8,433.
		Gross income from fundraisin	a events (not			,,	·	0/2001
une	-	including \$	-					
Other Reven		contributions reported on line						
Ę.		Part IV, line 18	a					
ţ.	b	Less. direct expenses	b					
٥	С	Net income or (loss) from fund	draising events	•				
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	. а					
	b	Less: direct expenses	. b					
1	С	Net income or (loss) from gam	ning activities					<u> </u>
	10 a	Gross sales of inventory, less	returns					
1		and allowances	а					
	b	Less. cost of goods sold	b					
ļ	с	Net income or (loss) from sale	s of inventory	•				
]	_	Miscellaneous Revenu	10	Business Code				
	11 a	MISC		900099	104,734.			104,734.
	b							<u> </u>
	С			1				<u> </u>
1	d	All other revenue		L_				
	е	Total. Add lines 11a-11d		▶	104,734.			
22200	12	Total revenue. See instructions.			1,176,719.	0.	0	
232009 12-10-	12							Form 990 (2012)

Form 990 (2012) MISSISSIPPI, INC.
Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons		s Part IX	<u></u>	<u> </u>
	not include amounts reported on lines 6b, 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	673,366.	673,366.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				· - · · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
3	trustees, and key employees				
6	Compensation not included above, to disqualified				
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	197,542.	44,417.	75,599.	77,526
8	Pension plan accruals and contributions (include	137/3421	11,11,	13,333.	11,520
•	section 401(k) and 403(b) employer contributions)	15,433.	2,834.	6,955.	5 644
9	Other employee benefits	9,830.	1,758.	3,602.	5,644 4,470 5,677
10	Payroll taxes	17,235.	3,313.	8,245.	5.677
11	Fees for services (non-employees)		5/0201		<u> </u>
а					
b	Legal				-
С	Accounting	22,803.	8,464.	7,898.	6,441
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			, <u> </u>	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	18,435.	21.	16,082.	2,332
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	137,698.	29,244.	36,756.	71,698
17	Travel	3,935.	807.	1,384.	1,744
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.000			
19	Conferences, conventions, and meetings	9,073.	6,648.	1,862.	563
20	Interest				
21	Payments to affiliates	0 201	500	4 010	0.60
22	Depreciation, depletion, and amortization	2,381.	508.	1,010.	863
23	Insurance Other eveness ltemys eveness not envered	3,865.	567.	2,299.	999
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 0.)				
а	GRANT EXPENDITURES	108,301.	108,301.		
b	MISCELLANEOUS EXP.	17,867.	44.	17,823.	
c	DUES	13,510.		13,080.	430
d	EQUIP. RENTAL & MAINTEN	13,186.	3,194.	4,583.	5,409
	All other expenses	22,121.	4,659.	7,067.	10,395
25_	Total functional expenses. Add lines 1 through 24e	1,286,581.	888,145.	204,245.	194,191
26	Joint costs. Complete this line only if the organization				<u> </u>
	reported in column (B) joint costs from a combined		-		
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2012)
Part X Balance Sheet

Part X	Check if Schedule O contains a response to any question in this Part X		_	
	encer in concession of contained a response to any question in this rate X	(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	129,517.	1	172,107
2	Savings and temporary cash investments	883,437.	2	848,418
3	Pledges and grants receivable, net	1,033,739.	3	1,032,726
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	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 instr). Complete Part II of Sch L		6	
7 8	Notes and loans receivable, net	763,303.	7	702,886
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	4,049.	9	10,678
108	Land, buildings, and equipment cost or other			
	basis. Complete Part VI of Schedule D 10a 73, 165.			
1	Less: accumulated depreciation 10b 69,832.	4,368.	10c	3,333.
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,818,413.	16	2,770,148
17	Accounts payable and accrued expenses	15,064.	17	17,337
18	Grants payable	782,817.	18	826,343
19	Deferred revenue	37,909.	19	51,722
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
21 22	key employees, highest compensated employees, and disqualified persons			
i	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	-
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	_
26	Total liabilities. Add lines 17 through 25	835,790.	26	895,402.
	Organizations that follow SFAS 117 (ASC 958), check here X and			
:	complete lines 27 through 29, and lines 33 and 34.	_		
27 28 29 30 31 32	Unrestricted net assets	1,982,623.	27	1,874,746.
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,982,623.	33	1,874,746.
34	Total liabilities and net assets/fund balances	2,818,413.	34	2,770,148.

Form 990 (2012)

Pa	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				\mathbf{x}		
1 2 3	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1	2 3	1,17 1,28 <10	6,5			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,98				
5	Net unrealized gains (losses) on investments	5	<u> </u>	<u> </u>			
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		1,9	85.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			•			
	column (B))	10	1,87	4,7	46.		
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				No		
1	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 Schedule O.						
2a	·		2a		X		
b							
С	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. X Separate basis Consolidated basis Both consolidated and separate basis 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?						
3а	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 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?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt	3a		<u>X</u>		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2012)		

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.

2012

Open to Public Inspection

Name of the organization **Employer identification number** UNITED WAY OF WEST CENTRAL MISSISSIPPI 64-0330259 INC. 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. b Type II c ____ Type III - Functionally integrated d ____ Type III - Non-functionally integrated 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Nο 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) (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organizátion in col. in col. (i) listed in your organization in col. organization (described on lines 1-9) support (i) organized in the U.S.? (i) of your support? above or IRC section governing document? (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Total

64-0330259 Page 2 Schedule A (Form 990 or 990-EZ) 2012 MISSISSIPPI, INC. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
	Gifts, grants, contributions, and	-						
	membership fees received. (Do not							
	include any "unusual grants.")	930,450.	1065169.	909,015.	1033233.	952,553.	4890420.	
2	Tax revenues levied for the organ-			-				
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities					-		
	furnished by a governmental unit to							
	the organization without charge					İ		
4	Total. Add lines 1 through 3	930,450.	1065169.	909,015.	1033233.	952,553.	4890420.	
5	The portion of total contributions			•		•		
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4				_		4890420.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
7	Amounts from line 4	930,450.	1065169.	909,015.	1033233.	952,553.	4890420.	
8	Gross income from interest,		-					
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	89,694.	77,537.	84,706.	100,858.	78,162.	430,957.	
9	Net income from unrelated business					_		
	activities, whether or not the							
	business is regularly carried on	_						
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part IV.)	58,323.	79,514.	35,048.	107,505.	146,004.	426,394.	
11	Total support. Add lines 7 through 10						5747771.	
12	Gross receipts from related activities,	etc (see instruction	ons)			12		
13	First five years. If the Form 990 is for	the organization's	first, second, thire	d, fourth, or fifth ta	ıx year as a sectioi	n 501(c)(3)		
	organization, check this box and stop	here					▶□_	
Sec	tion C. Computation of Publi	ic Support Pe	rcentage					
14	Public support percentage for 2012 (l	ıne 6, column (f) dı	vided by line 11, c	olumn (f)) _.		14	85.08 <u>%</u>	
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	85.40 <u>%</u>	
16a	33 1/3% support test - 2012. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo		
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ [X]	
b	33 1/3% support test - 2011. If the o	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	us box	
	and stop here. The organization quali	ifies as a publicly s	supported organiza	ation .			▶□	
17a	10% -facts-and-circumstances test	t - 2012. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,	
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	iis box and stop h	ere. Explain in Par	t IV how the organ	ization	
	meets the "facts-and-circumstances" $$	test. The organizat	tion qualifies as a	publicly supported	lorganization		▶	
b	10% -facts-and-circumstances test	t - 2011. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or	
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	eck this box and :	stop here. Explain	ın Part IV how the	,	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	nızation	. ▶□	
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s ▶ □	
					Scho	dule A (Form 990	or 990-F7) 2012	

Schedule A (Form 990 or 990-EZ) 2012 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 be	low, please com	plete Part II.)				
Section A. Public Support	(=) 2000	(F) 2000	(-) 0010	(c) 0044	452.0010	(D.Tatal
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and				ļ		
membership fees received. (Do not include any "unusual grants.")			!			
, , , ,		 			<u> </u>	
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 bus-						
iness under section 513		<u> </u>				
Tax revenues levied for the organ- ization'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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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)		L				
14 First five years. If the Form 990 is for	the organization'	's first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here		<u> </u>				▶□
Section C. Computation of Publi	c Support Pe	rcentage			,	
15 Public support percentage for 2012 (III	ne 8, column (f) d	divided by line 13, o	olumn (f))		15	%
16 Public support percentage from 2011				· · · · · · · · · · · · · · · · · · ·	16	%
Section D. Computation of Inves						
17 Investment income percentage for 20			ne 13, column (f))		17	%
18 Investment income percentage from 2	•	·			18	%
19a 33 1/3% support tests - 2012. If the	-				•	7 is not
more than 33 1/3%, check this box an			-	-		
b 33 1/3% support tests - 2011. If the						and
line 18 is not more than 33 1/3%, chec		-	· ·		-	▶⊨
20 Private foundation. If the organization	i did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	▶∟」

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.

2012
Open to Public Inspection

Name of the organization

UNITED WAY OF WEST CENTRAL

MISSISSIPPI, INC.

Employer identification number 64-0330259

organization answered "Yes" to Form 990, Part IV, line 6. Total number at end of year	Pa	rt I	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
1 Total number at end of year 2 Aggregate value at end of year 3 Aggregate value at end of year 4 Aggregate value at end of year 5 Dd the enganization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization form all denors and donor advisors in writing that the assets held in donor advised funds are the organization informal grantes, 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 impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes conferring impermissable purpose conferring purpose conferring impermissable purpose conferring impermissable purpose conferring purpose conferring impermissable purpose conferring purpose conferring impermissable purpose conferring purpose			organization answered "Yes" to Form 990, Part IV, line	∍ 6.	
2 Aggregate contributions to (during year) 3 Aggregate value at end of 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 inform all donors and donor advisors in writing that grant funds can be used only for charactable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charactable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring majority of charactable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring majority of charactable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring majority of the donor advisors in the propose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose any other purpose and other any other purpose and other				(a) Donor advised funds	(b) Funds and other accounts
2 Aggregate contributions to (during year) 3 Aggregate value at end of 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 inform all donors and donor advisors in writing that grant funds can be used only for charactable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charactable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring majority of charactable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring majority of charactable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring majority of the donor advisors in the propose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or for any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose conferring majority of the donor advisors or any other purpose any other purpose and other any other purpose and other	1	Tota	I number at end of 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 in property, subject to the organization's exclusive legal control? Old the organization inform all 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 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 impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes and not for be benefit? Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization of check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an instruction of and for public use (e.g., recreation or education) Preservation of an after property and the end of the preservation of a certified historic structure Preservation of a natural habitat Preservation of an attribute and the end of the end of the end of the end of the tax year. The full acreage restricted by conservation easements Total acreage restricted by conservation easements Total acreage restricted by conservation easements in the end of the end of the Tax Year. A tribute of conservation easements in conservation easement is property subject to conservation easement is coated ▶ Number of conservation easements in conservation easement is property subject to conservation easement is coated ▶ Number of states where property subject to conservation easements is noted to expense a tatement, and balance sheet, and violations, and enforcement of the conservation easements in hidds or volations, and enforcement of the conservation easement is pro	2		· · · · · · · · · · · · · · · · · · ·		
A 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 inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conterning membrable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conterning membrable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conterning membrable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conterning membrable purposes and not for the preservation (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an instorically important land area Preservation of an after public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space 2 Complete lines 2 a 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. a Total number of conservation easements assements 2 2a	3				
5 Did the organization inform all donors and denor adviseors in writing that the assets held in donor advised funds are the organization property, subject to the organization's exclusive legal control? 1 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 impermentable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermentable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring impermentation provided in the provided provided in the provided provided in the provided provi	_		r i i i i i i i i i i i i i i i i i i i		
are the organization's property, subject to the organization's exclusive legal control? Yes	5		•	writing that the assets held in donor advise	ed funds
b Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferming impermissable private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	_		-	_	
tor charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring meministic benefit? Part Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an Instorically important land area Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a b Total number of conservation easements Protection of conservation easements included in (c) acquired after 8/17/05, and not on a historic structure 2a Double of conservation easements included in (c) acquired after 8/17/05, and not on a historic structure Protection of conservation easements included in (c) acquired after 8/17/05, and not on a historic structure Protection of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Protection of conservation easements in thous Protection 6					
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)	•				•
Part I 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)				value advisor, or for any other purpose of	
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 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. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 1. 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 year ▶ Number of states where property subject to conservation easement is located ▶ Number of states where property subject to conservation easement is located ▶ Number of states where property subject to conservation easement is located ▶ Does each conservation asement of the conservation easements it holds? No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ No espenses incurred in monitoring, inspecting to enforcing conservation easements during the year ▶ No espenses in	Pa			anization answered "Yes" to Form 990. Pa	
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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 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 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	9	In Pa	art XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
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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 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		cons	ervation easements		-
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 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	Pa	rt III	Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.
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 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			Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
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	1a	If the	organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statem	ent and balance sheet works of art,
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		histo	rical treasures, or other similar assets held for public exh	nibition, education, or research in furtheran	ce of public service, provide, in Part XIII,
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		the t	ext of the footnote to its financial statements that descri	bes these items	
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	If the	organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement :	and balance sheet works of art, historical
(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		treas	ures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic service, provide the following amounts
(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: a Revenues included in Form 990, Part VIII, line 1		relati	ng to these items		_
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		(i) F	Revenues included in Form 990, Part VIII, line 1	<u>-</u>	> \$
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		(ii) A	Assets included in Form 990, Part X		> \$
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	2	If the	organization received or held works of art, historical trea	asures, or other similar assets for financial	gain, provide
a Revenues included in Form 990, Part VIII, line 1					
b Assets included in Form 990, Part X	а			· -	▶ \$
	b	Asse	ts included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

UNITED WAY OF WEST CENTRAL

		IPPI, INC.							3025		age 2
Par	rt III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, o	or Oth	<u>er Similar</u>	Asse	ts(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following tha	at are a s	ignificant us	e of its	collection	ıtem	s
	(check all that apply):		_								
а	Public exhibition	c	; <u> </u>	Loan or exc	hange progra	ams					
b	Scholarly research	•	• 🗀	Other			_				
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	ın how th	ney further t	he organizati	on's exe	empt purpose	ın Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets		_		_
	to be sold to raise funds rather than to be ma			_			· · · · ·	<u>. L</u>	Yes		No
Par	rt IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to	Form 990, P	art IV, I	ine 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not	Included	_	_		_
	on Form 990, Part X?	•						. ∟	」Yes	<u> </u>	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	table [.]							
									Amount		
С	Beginning balance	-	•				1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance				-		1f				
	Did the organization include an amount on Fo							. L	」 Yes		No
	if "Yes," explain the arrangement in Part XIII.										<u></u>
Par	rt V Endowment Funds. Complete it	•	nswered	"Yes" to Fo					T		
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three year	rs back	(e) Four	years	back
1a	Beginning of year balance				ļ						
b	Contributions			•			<u>-</u>				
С	Net investment earnings, gains, and losses										
d	Grants or scholarships	····_									
е	Other expenditures for facilities										
	and programs		<u> </u>								
f	Administrative expenses										
g	End of year balance				l						
2	Provide the estimated percentage of the curr	=		g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	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										
За		ssion of the organiz	ation tha	it are held a	ind administe	red for t	he organizati	on	г		
	by									Yes	No
	(i) unrelated organizations								3a(i)	\longrightarrow	
_	(ii) related organizations			=-					3a(ii)		
b	If "Yes" to 3a(ıı), are the related organizations								3b_		
Box	Describe in Part XIII the intended uses of the										
Fai	t VI Land, Buildings, and Equipm					<u> </u>					
	Description of property	(a) Cost or o		• •	or other	• • •	ccumulated		(d) Book	. value	Э
	Land.	basis (investr	nent)	Dasis	(other)	ae	preciation				
	Land										
	Buildings										
	Leasehold improvements		1.65				60 000	+			
	Equipment	73,	165.				69,832	' - -		<u>کی د</u>	<u>33.</u>
_	Other	i .						1			

Schedule D (Form 990) 2012

3,333.

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

Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	(b) Book value		on: Cost or end-of-year market value
Financial derivatives	(D) DOOK VAIUE	(c) Metriod of valuati	Sold of Sild of your market value
Closely-held equity interests			
Other			
(A)			· · · · · · · · · · · · · · · · · · ·
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			-
al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
art VIII Investments - Program Related. See	Form 990, Part X, line	÷ 13	
(a) Description of investment type	(b) Book value		on: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
10)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			\$
art IX Other Assets. See Form 990, Part X, line 1			
(a) Do	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)		- 	
(6)			
(7)			
(8)	· 	····	
(9)			
(0)			
al. (Column (b) must equal Form 990, Part X, col (B) line	15.)	• • • • • • • • • • • • • • • • • • • •	🕨
art X Other Liabilities. See Form 990, Part X, In	e 25	#A Danta salara	
(a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		-	
10)			
11)			
al. (Column (b) must equal Form 990, Part X, col. (B) line	:	1	

Schedule D (Form 990) 2012

UNITED WAY OF WEST CENTRAL

Sobo	onlied wal of west central adule D (Form 990) 2012 MISSISSIPPI, INC.	61	0220250 5 4
	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F		0330259 Page 4
1	Total revenue, gains, and other support per audited financial statements	1	1,176,719.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	-"-	1,110,119.
a	Net unrealized gains on investments	٠	
b	Donated services and use of facilities 2b	1	
c	Recoveries of prior year grants 2c	┦	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,176,719.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1,110,113.
a			
b	Other (Describe in Part XIII) 4a 4b	-{	
C	Add lines 4a and 4b	1 . 1	0
5	• • • • • • • • • • • • • • • • • • • •	4c 5	1,176,719.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
	Total expenses and losses per audited financial statements	1	
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	1,286,581.
2			
a	Donated services and use of facilities 2a	-	
b	Prior year adjustments 2b	-	
C	Other losses	-	
d	Other (Describe in Part XIII)	4 _	•
_	Add lines 2a through 2d	2e	1 206 501
3	Subtract line 2e from line 1	3	1,286,581.
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	4	
b	Other (Describe in Part XIII.)		_
С	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	1,286,581.
	rt XIII Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1		2b, Part V, line 4, Part
	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional informa		
PAF	RT X, LINE 2: THE ORGANIZATION ADOPTED THE STANDARD IN 200	19.	ITS
INC	COME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AU	<u>JTHOI</u>	RITIES, AND
THE	BOPEN AUDIT PERIODS ARE THE TAX YEARS 2007 TO 2009. IN EV	ALU	ATING THE
ORG	GANIZATION'S TAX PROVISIONS AND ACCRUALS, FUTURE TAXABLE 1	NCO	ME, AND THE
REV	VERSAL OF TEMPORARY DIFFERENCES, INTERPRETATIONS, AND TAX	PLAJ	NNING
STF	RATEGIES ARE CONSIDERED. THE ORGANIZATION BELIEVES THEIR E	<u>:STII</u>	MATES ARE
3 D.F	PROPRIATE BASED ON CURRENT FACTS AND CIRCUMSTANCES.		
APH	KOPKIATE BASED ON CORRENT BACTS AND CIRCUMSTANCES		

Schedule D (Form 990) 2012

Employer identification number 64 – 0330259 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. UNITED WAY OF WEST CENTRAL MISSISSIPPI, INC. MISSISSIPPI, Name of the organization Department of the Treasury Internal Revenue Service **SCHEDULE 1** (Form 990)

OMB No 1545-0017

Open to Public Inspection

Part	Part I General Information on Grants and Assistance	nd Assistance							- 1
1 Does	Does the organization maintain records to substantiate the amount of	o substantiate the		or assistance, the	grantees' eligibility	for the grants or ass.	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	}	
criteri	criteria used to award the grants or assistance?	tance?						Yes X No	0
2 Descr	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the United	d States				I
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	sovernments and	Organizations in the	United States. Co	omplete if the orga	inization answered "Y	es" to Form 990, Part I	V, line 21, for any	
	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if addition	onal space is need	Jed.				١
1 (a) N	(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	
VARIOUS	VARIOUS VICKSBURG AND SURROUNDING AREAS			673.366.	0				1
									I
									l
									!
									1
									I
2 Enter 3 Enter	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations listed in the line 1 table	nd government org		isted in the line 1 table					
LHA For	For Paperwork Reduction Act Notice, see the Instructions for For	see the Instruction	ons for Form 990.	:				Schedule I (Form 990) (2012)	ହ

UNITED WAY OF WEST CENTRAL

64-0330259 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 MISSISSIPPI, Schedule | (Form 990) (2012) Part III

Page 2

(f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

232102 12-18-12

Schedule I (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

2012
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Inspection
Employer identification number

64-0330259

Name of the organization UNITED WAY OF WEST CENTRAL MISSISSIPPI, INC.

FORM 990, PART VI, SECTION B, LINE 11: DRAFT COPY OF RETURN PROVIDED TO

EXECTIVE DIRECTOR FOR REVIEW BEFORE BEING SIGNED AND MAILED

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF EXECUTIVE DIRECTOR

AND OFFICER IS REVIEWED AND ADJUSTED ANNUALLY BY THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION C, LINE 18: THE FORMS 990 AND 1023 ARE

AVAILABLE UPON REQUEST IN THE UNITED WAY OF WEST CENTRAL OFFICE. COPIES

ARE AVAILABLE FOR THE FULL BOARD AT THE JUNE MEETING. THE 990 IS ALSO ON

THE WEBSITE AT WWW.UNITEDWAYVICKSBURG.ORG

FORM 990, PART VI, SECTION C, LINE 19: THERE IS CURRENTLY NO POLICY IN

PLACE TO MAKE THESE ITEMS AVAILABLE TO THE GENERAL PUBLIC. THE BOARD

RECEIVES COPIES ANNULLY IF CHANGES ARE MADE OR THERE IS A NEW BOARD MEMBER.

IF APPLICATION FOR GRANTS OR FUNDS REQUEST THE ITEMS, THEY ARE SUBMITTED.

A STATMENT OF FINANCIAL POSITION IS PART OF THE ANNUAL REPORT TO THE

COMMUNITY.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

UNREALIZED GAIN ON INVESTMENTS

1,983.

ROUNDING

2.

TOTAL TO FORM 990, PART XI, LINE 9

<u>1,985.</u>

FORM 990, PARK XII, LINE 2 C:

THERE WERE NO CHANGES DURING THIS TAX YEAR.

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

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

UNITED WAY OF WEST CENTRAL MISSISSIPPI 2012 EXECUTIVE COMMITTEE

OFFICERS

CHAIR

TOM KENDALL

Trustmark Bank

(601) 631-3206

P O Box 39

FAX: (601) 631-3351

Vicksburg, MS 39181

E-MAIL: tkendall@trustmark.com

1st VICE CHAIR

RET BG ROBERT CREAR

The Crear Group

(601) 631-4177

4223 I 20 Frontage Rd, Apt I-11

(601)

E-MAIL: robertcrear@aol.com

TREASURER

CHRIS CHATHAM

Ameristar Casino

601-630-3740

200 Manship Circle

Vicksburg, MS 39183

FAX: 601-630-3742

Vicksburg, MS 39180

E-MAIL: chris.chatham@ameristar.com

IMMEDIATE PAST CHAIR

DONALD JARRATT

Coomes Produce Co.

(601) 638-8858

112 Carlton Place Dive

FAX: (601) 638-8859

Vicksburg, MS 39180

E-MAIL: dljarratt@cablelynx.com

COMMITTEES

DONOR INVESTMENT

RYAN LEE (601) 631-3219

Trustmark Bank

P O Box 39

CHAIR

FAX: (601) 631-3351

Vicksburg, MS 39181

E-MAIL: rlee@trustmark.com

CAMPAIGN CHAIR AMY HAYGOOD

Trustmark Bank

(601) 636-1151

P O Box 39

FAX: (601) 631-3370

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E-MAIL: ahaygood@trustmark.com

MEMBER AT LARGE LAUREN CAPPAERT

Teller, Hassell & Hopson, LLP

(601) 636-6565

1201 Cherry Street

(601) 631-0114

Vicksburg, MS 39183

E-MAIL: lcappaert@tellerlaw.com

MEMBER

ANNIE JENKINS

Ameristar Casino

AT LARGE

(601) 630-3758

4116 Washington Street Vicksburg, MS 39180

FAX: (601) 630-3808 E-MAIL: annie.jenkins@ameristar.com

MEMBER AT LARGE

BARBARA HICKMAN

May & Company 110 Monument Place

(601) 619-2922 (601) 636-9476

Vicksburg, MS 39180

E-MAIL: bhickman@maycpa.com

STAFF

United Way of West Central MS P. O. Box 203 Vicksburg, MS 39181

920 South Street Vicksburg, MS 39180

601-636-1733 Fax: 601-638-7636

E-Mail: unitedway@vicksburg.org

Website: www.unitedwayvicksburg.org

Barbara Tolliver Executive Director

E-Mail: barbara@unitedwayvicksburg.org

Ruby Green

Administrative Assistant/Office Manager

E-Mail: ruby@unitedwayvicksburg.org

Charlotta Ferguson Accountant/CFC

E-Mail: charley@unitedwayvicksburg.org

Christy Wilson Marketing Director

E-Mail: christy@unitedwayvicksburg.org

Ann Roberson

Relationship/Donor Investment Director

E-Mail: ann@unitedwayvicksburg.org

2012 Board of Directors

Paul Avery	Rainbow Casino 1380 Warrenton Rd Vicksburg, MS 39180 paul.avery@rainbowcasino.com paul.avery@islecorp.com (228) 365-5944
Angela Brown	WC Tax Assessor (601) 638-6161 110 Skyline Drive (601) 630-8032 Vicksburg, MS 39183 angelb@co.warren.ms.us (601) 906-5930
Carrie Callender	Anderson Tully 1725 N Washington Street Vicksburg, MS 39182 (601) 629-6704 (601)629-3626 carriec@andersontully.com (601)
Lauren R. Cappaert	Teller, Hassell & Hopson, LLP 1201 Cherry Street (601) 636-6565 Vicksburg, MS 39183 lcappaert@tellerlaw.com (601) 259-7897
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