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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

Open to Public

Department of the Treasury

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 20 13 2012, and ending June 30 For the 2012 calendar year, or tax year beginning July 1 D Employer identification number Check if applicable C Name of organization United Way of Central Massachusetts, Inc. 04-2104017 Doing Business As Address change Number and street (or P O box if mail is not delivered to street address) Room/surte E Telephone number Name change 300 508.757.5631 Initial return 484 Main Street City, town or post office, state, and ZIP code Terminated G Gross receipts \$ 9,128,151 Amended return Worcester, MA 01608-1893 H(a) Is this a group return for affiliates? Yes No F Name and address of principal officer Timothy J. Garvin Application pending same as above If "No," attach a list (see instructions) 501(c)(3) 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status H(c) Group exemption number ▶ Website: ▶ www.unitedwaycm.org Association ☐ Other ► L Year of formation M State of legal domicile Form of organization Corporation Trust 1920 MA Part I Summary Briefly describe the organization's mission or most significant activities. United Way of Central Massachusetts connects people and resources to improve the community. Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 23 4 Number of independent voting members of the governing body (Part VI, line 1b) 21 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 5 32 6 <u>1,9</u>94 6 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0 Net unrelated business taxable income from Form 990-17, The 845-1 7b 0 Pnor Year **Current Year** Contributions and grants (Part VIII, line 1h) 6,504,806 6,481,521 8 Revenue Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 230,117 332,793 Other revenue (Part VIII, column (A), lines 5, 6d, 85,95, 100, and 11e) 11 2,215 (21.491)Total revenue - add lines 8 through 11 (must equal Part htt, column (A), line 12 6,713,853 6,816,108 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,214,<u>936</u> 4,210,831 13 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 0 Ω Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 1,753,044 1,556,615 Professional fundraising fees (Part IX, column (A), line 11e) 16a 30,133 19.543 Total fundraising expenses (Part IX, column (D), line 25) ▶ 18 X **大学等** 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 923,841 785,760 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 6,917,849 6,576,854 Revenue less expenses. Subtract line 18 from line 12 19 (203,996)239,254 Beginning of Current Year End of Year Total assets (Part X, line 16) 9,798,009 20 9,143,680 Total liabilities (Part X, line 26) . 21 4,376,118 4,336,698 Net assets or fund balances Subtract line 21 from line 20 22 4,767,562 5,461,311 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of office Here IMOTHY Type or print name and title Date Print/Type preparer's name Preparer's signature Check | if Paid self-employed **Preparer** Firm's EIN ▶ Firm's name Use Only Phone no Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Form 990 (2012)

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Yes	☑ No
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التجنين	0 (2012) Page Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1 ,	Briefly describe the organization's mission:
• (United Way of Central Massachusetts connects people and resources to improve the community.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
,	services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3,449,283 including grants of \$ 3,112,026) (Revenue \$)
	Community Impact Program - The Community Impact Program plays a critical role in improving our community. Our work is
	organized around Education, Family Stability and Health, which are considered essential building blocks for a successful life.
	By 2020 United Way, aspires to see a 10% change in the following factors in Central Massachusetts:
	1. Increasing the high school graduation rate for at-risk youth
	2. Reducing the child poverty rate
	3. Reducing the childhood obesity rate. In addition, this program helps to providing services to stabilize those who are unable to meet their basic needs due to
	conditions that create vulnerability. United Way of Central Massachusetts staff and volunteers, through a competitive process,
	evaluate funding proposals, select the highest quality agency programs to fund, and monitor program results to ensure maximum
	community impact. During FY 2013, 50 funded programs provided services in one or more of the three basic components for a successful life: education, family stability, and health.
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Part I	V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, 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	√	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	✓	
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		✓
	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		√
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11e	✓	✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	,	\
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	✓ :	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Forn	n 990	(2012)

Part l	V Checklist of Required Schedules (continued)			
			Yes	No
21 ,	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	√	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	✓	
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Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u>.</u> .		. 🗸
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 23			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 32	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		1
	·	4a		V
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			i
E	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		∀
b c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		\checkmark
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	, !		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	00		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
. а	Initiation fees and capital contributions included on Part VIII, line 12	!		i
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			:
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	ì.		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	–		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
þ	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	4 -	i	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\longrightarrow	✓
n	it "Yee " has it tiled a Form 72U to renort these navments? It "No " brovide an explanation in Schedule ()	174h	J	

Form 99				age o
Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Çacti	Check if Schedule O contains a response to any question in this Part VI	<u></u> -	<u>· · · · </u>	V
Secu	on 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			
	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 .			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		√
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	\longrightarrow	✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	\longrightarrow	√
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	/a		_
D	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		,	
Cooti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	vde)	
Secu	on B. Policies (This Section B requests information about policies not required by the internal neven		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	\rightarrow	√
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		\neg	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		√	
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 in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	100	,	
14	Did the organization have a written document retention and destruction policy?	14	7	
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	✓	
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	101		
<u> </u>	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Massachusetts			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(ด	:)(3)s	only)
19	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records			
	organization: ► James Hayes, United Way of Central MA, 484 Main Street, Suite 300, Worcester, MA 01608 508.757.56			
		Form	990	(2012)

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d orga	anız	atic	n c	ompe	ensa	ited any currer	t officer, director	, or trustee.
				((C)					
(A)	(B)	١			ition			(D)	(E)	(F)
Name and Title	Average					than one is that		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any hours for	욕증	J.	오	6	₽.F	3	from the	related organizations	other compensation
	related	Individual trustee or director	<u>ਵ</u> ੇ	Officer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	et al	, S		횽	ee co]	(W-2/1099-MISC)		organization and related
	line)	trus	7		yee	m mg				organizations
		ee	Institutional trustee			Highest compensated employee		1		
	<u> </u>					<u>e</u>	_			
(4) Device Coultman	1									
(1) Bruce Gaultney	<u>-</u>	1		1			İ			
Chair of the Board of Directors		_		· ·	├		-			
(2) Michael Mulrain	11	1		1						
Treasurer (2) -	1 1	<u> </u>	-	•			├	-		
(3) Frances Anthes	-}!	1		/						
Clerk		-	├	\ <u> </u>	\vdash		├			
(4) Edward Augustus, Jr.	11_	1						1		
At-large Board member		V	-	-	├		┢╌			
(5) Todd Bailey	11									
At-large Board member		√	-	-		_	┝			
(6) Reverend Lois Bond, Ph.D.	11	,					1			
At-large Board member		✓	-	<u> </u>			<u> </u>			
(7) Melinda Boone, Ed.D	11				ĺ					
At-large Board member	ļ	✓	<u> </u>	-	ļ. —		-			
(8) Douglas Brown	11	,								
At-large Board member	ļ	✓	<u> </u>		<u> </u>	<u> </u>	<u> </u>	ļ		
(9) Jack Calareso, Ph.D.	1	,		j])		
At-large Board member		✓	_	_			<u> </u>			
(10) Joseph Carlson	11									
At-large Board member		✓		Ļ			<u> </u>			
(11) James Coghlin, Jr.	1									
At-large Board member		✓		_	<u> </u>		<u> </u>			
(12) Glenda Daou, MA LMHC	11									
At-large Board member		✓		$ldsymbol{ld}}}}}}$			ļ			
(13) Joseph Freitas	1									
At-large Board member	ļ <u> </u>	✓			L_		<u>L</u>			
(14) Eve Gilmore	11						-	}		
At-large Board member		✓]								

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (continu	ed)
	(C)											
•	(A)	(B) Position (do not check more than				than o	one	(D)	(E)		(F)	
	Name and title	Average	box,	unles	s pe	rson	ıs both	an	Reportable	Reportable compensation from		Estimated amount of
		hours per week (list any	⊢				or/trust	<u></u>	compensation from	related		other
		hours for	유료	l Ing	Officer	Key employee	eng H	Former	the	organizati		compensation
		related	lirec ec	훜	ğ	em	nest	₫	organization (W-2/1099-MISC)	(W-2/1099-N	MISC)	from the organization
	,	organizations below dotted	or tal	[욻]		plo	8 5		(VV-2/1099-WISC)		- 1	and related
		line)	Individual trustee or director	Institutional trustee		/ee	nper					organizations
			ë	stee			Highest compensated employee					
(45)		-					ă	-				
	nes Leary	1	1									
	e Board member tsy Lewis	1	_	Н							_	
	e Board member		1									
	ren Ludington	1		П								
	Board member		✓									
(18) Na	dia McGourthy	11										
	e Board member		✓	\sqcup				_				
	presentative James O'Day	1										
	e Board member		✓	-								
	rcy Reed	11	1									
	e Board member win Shea	1									$\overline{}$	
	e Board member	} -	1									
	verend Clyde Talley	1										<u> </u>
	e Board member		✓									
(23) Mi	chael Tsostis	11			ŀ							
	e Board member	_	<u> </u>		_							
(24) Na	ncy Kidd-Brown	11			١.			١.				
Forme		_		Ш	✓			✓				
	nothy Garvin	 			ŀ	,	,					
	ent and CEO				L	✓		<u> </u>	125,860		-	
	Sub-total			•	•	•			125,860			
6	Total from continuation sheets to Part Total (add lines 1b and 1c)			•			•		186,105 311,965		-	
d	Total number of individuals (including but	not limited						2) 14/			00 000	of
	reportable compensation from the organi		1 10 11	1036	, 1131	eu i	above	<i>5)</i> **	no received in	ore than wi	00,000	OI .
	<u></u>											Yes No
3	Did the organization list any former of							emp	loyee, or high	est compe	ensated	WAR TO A SHIP
	employee on line 1a? If "Yes," complete 3							•				3 🗸
4	For any individual listed on line 1a, is the											
	organization and related organizations	_								edule J fo	r such	
	Individual										 	4
5	Did any person listed on line 1a receive of for services rendered to the organization											THE RESIDENCE OF THE PARTY OF
Contin	on B. Independent Contractors	: 11 163, 0	Ciripi	Cic	<u> </u>	1001	<i>ne 0 1</i>	0/ 3	acri persori		<u></u>	5 🗸
1	Complete this table for your five highest	compensat	ed in	dene	end	ent	contr	acto	ors that receive	ed more tha	n \$100	1.000 of
•	compensation from the organization. Rep											
	year.	•						Ī	J		•	
	(A)	-	•						(B)	_		(C)
	Name and business add	ress						L_	Description of s	ervices		Compensation
								<u> </u>				
								-				
								-				
		<u> </u>										
2	Total number of independent contractor	rs (includir	ng bu	ıt n	ot 1	ımıt	ed to	th	ose listed abo	ove) who	1	
	received more than \$100,000 of compens								0		Link - Las	

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yees			lighe	st C	ompensated E	mployees (continu	ıed)		
					•	C)								
•	(A)	(B)	(do n		Pos eck	-	e than c	ne	(D)	(E)			(F)	
	Name and title	Average	box, i	unles	s pe	rson	is both	an	Reportable compensation	Reportab compensation			nated unt of	
		hours per week (list any					or/trust	· ·	from	related			her	
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	불	Former	the	organizatio		•	ensatio	n
		related organizations	re d	ᄠ	ğ	eg .	l g g	ner	organization (W-2/1099-MISC)	(W-2/1099-N	AISC)		n the lization	
		below dotted	현	onal		οĮ	<u>a</u> 8		(2			and	related	
		line)	LIST.	เกาะ		ee	pen					organ	ızatıons	3
			ď	tee			Highest compensated employee							
(15) 10	nnifer Davis Carey	35			-		<u> </u>	-						
	ive Director, Worc Education Collaborative	33				1			101,615		l			
		35			\vdash	-	-		10.,0.0					
	resident, Finance and Operations	·	1		1	1			84,490					
(17)														
Y														
(18)														
			ļ		_			<u> </u>						
(19)														
-			ļ											
(20)			-								ŀ			
(21)			 			 		\vdash	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
(21)											l			
(22)			<u> </u>											
3														
(23)]											
(24)		ļ	1											
(O.T.)				\vdash	\vdash	_			 					
(25)			ł											
1b	Sub-total		·				<u> </u>	-	186,105	-				
c	Total from continuation sheets to Part		n A	i	,			•	1007.00					
d	Total (add lines 1b and 1c)													
2	Total number of individuals (including but							e) w	ho received m	ore than \$1	00,000) of		
	reportable compensation from the organ											<u>. </u>		
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compe	ensated	1	·	<u> </u>
	employee on line 1a? If "Yes," complete										• •	3		
4	For any individual listed on line 1a, is the	sum of re	portal	ble (com	pe	nsatio	n a	nd other comp	ensation fr	om the	. 1 1		•
	organization and related organizations		an \$	150,	UUU)? I	r "Ye	S,	complete Sch	leaule J TO	r sucr		*	<u></u>
_	Individual								rolated arasni			4	-	
5	Did any person listed on line 1a receive of for services rendered to the organization											5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensat	ed inc	dene	end	ent	contr	acto	ors that receive	ed more tha	n \$100	0.000 of		
•	compensation from the organization. Re												n's ta	ЭX
	year.	•						•	· ·			-		
-	(A)				•				(B)			(C)		
	Name and business add	dress							Description of s	ervices		Compens	ation	
								<u> </u>	 					
								-						
							_	 		-	_			
2	Total number of independent contractor	ors (includii	ng bi	ıt n	ot I	lımıt	ed to	th	ose listed abo	ove) who	5 563 56	W X. E. !!	ing:	- 1984
_	received more than \$100,000 of compen	sation from	the o	rgar	ııza	tion	▶			,		- 36 T		

Part	VIII (Statement of Reve	enue					
		Check if Schedule O	contains a respo	nse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	i 1a	137,085				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b	0				
S, C	C	Fundraising events .	1c	0				
Sift lar	d	Related organizations	i 1d	0				
is,	е	Government grants (con		(980)				
tio r S	f	All other contributions, g						
ibu		and similar amounts not inc		6,368,701	1			
d C	g	Noncash contributions include	·	0				
a C	h	Total. Add lines 1a-1	f <u></u>		6,504,806			
E E				Business Code				
Ver	2a	*						
8	b							
Aice Vice	С							
Ser	d							
E	е							
Program Service Revenue	f	All other program ser	vice revenue .					
<u> </u>	g	Total. Add lines 2a-2			0			
	3	Investment income						
		and other similar amo			95,693	 	 	95,693
	4	Income from investmen		ond proceeds ►				
	5	Royalties						
			(ı) Real	(ii) Personal				
	6a	Gross rents .	0		1			
	ь	Less. rental expenses	(53,597)		1			
	С	Rental income or (loss)						<u> </u>
	_ d	Net rental income or		>	(53,597)			(53,597)
	7a	Gross amount from sales of	(i) Secunties	(ii) Other		į		
		assets other than inventory	2,495,546		1			
	b	Less cost or other basis						
		and sales expenses	(2,258,446)		1			
	С	Gain or (loss) .	237,100			-		
	d	Net gain or (loss) .		· · · · •	237,100			237,100
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions report See Part IV, line 18		0				
Ě	ь	Less direct expenses	s b			ŀ		
J		Net income or (loss) f		events . ►	0			
		Gross income from g						
			· · · a	0		1		
	ь	Less direct expenses	s b	0				
	С	Net income or (loss)	from gaming act	ivities .	0			
	10a	Gross sales of in returns and allowance		0				, -
	ь	Less cost of goods						<u> </u>
	С	Net income or (loss)			0			ļ
		Miscellaneous F	Revenue	Business Code				
	11a	Cost recovery fees		900099	32,106	32,106		
	b							
	С							
	d	All other revenue						
	e	Total. Add lines 11a-			32,106			
	12	Total revenue. See	nstructions		6,816,108	32,106	 	279,196 Form 990 (2012)
								rorm 330 (2012)

	X Statement of Functional Expenses	 			
Sectio	n 501(c)(3) and 501(c)(4) organizations must con	·			
`	Check if Schedule O contains a respon			<u> </u>	
	t include amounts reported on lines 6b, 7b, , 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	4,214,936	4,214,936		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0	<u></u>	
5	Compensation of current officers, directors, trustees, and key employees	369,592	149,098	151,541	68,953
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	o	
7	Other salaries and wages	883,878	295,362	139,166	449,350
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	33,287 184,765	12,154 92,088	5,492 19,900	15,641 72,777
10	Payroll taxes	85.093	30,629	18,769	35,695
11	Fees for services (non-employees):			^	
а	Management	0	0	0	0
b	Legal	743	0	743	<u> </u>
C	Accounting	19,989	0	19,989	0
d e	Lobbying	19,543	0	0	19,543
f	Investment management fees	35,513	<u></u>	35,513	13,043
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	191,942	144,392	37,766	9,784
12	Advertising and promotion	39,064	6,962	1,951	30,151
13	Office expenses	99,030	43,332	35,559	20,139
14	Information technology	74,869	12,462	2,323	60,084
15 16	Royalties	103,867	0 42,765	0 22,329	38,773
17	Travel	27,685	12,620	6,200	8,865
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0,000
19	Conferences, conventions, and meetings	109,571	53,551	2,044	53,976
20	Interest	0	0	0	0
21	Payments to affiliates	57,794	21,323	13,129	23,342
22	Depreciation, depletion, and amortization	15,803	5,984 0	3,538	6,281
23 24	Insurance	3,575	0	3,575	0
24	above (List miscellaneous expenses in line 24e. If	1			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	<u></u>			
а	Organization dues	3,636	960	2,180	496
b	Miscellaneous	2,679	44	1,643	992
G					
d e	All other expenses				·
25	Total functional expenses. Add lines 1 through 24e	6,576,854	5,138,662	523,350	914,842
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here If following SOP 98-2 (ASC 958-720)				

Pa	ırt X				,		
		Check if Schedule O contains a response to	any qu	estion in this Part 2		· ·	· · · · · <u> </u>
	•			_	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			203,426	1	221,090
	2	Savings and temporary cash investments .			1,061,961	2	1,276,947
	3	Pledges and grants receivable, net			2,318,244	3	2,189,141
į	4	Accounts receivable, net		[56,920	4	43,935
İ	5	Loans and other receivables from current and	former o	officers, directors,			
		trustees, key employees, and highest co	ompens	ated employees.			
ŀ		Complete Part II of Schedule L			0	5	0
ıs	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volur organizations (see instructions) Complete Part II of Sche	nd contrib ntary em	outing employers and	0	6	
Assets	7	Notes and loans receivable, net		[0	7	0
As	8	Inventories for sale or use		F	0	8	0
	9	Prepaid expenses and deferred charges		[54,581	9	61,973
	10a	Land, buildings, and equipment: cost or		ĺ			
		other basis. Complete Part VI of Schedule D	10a	1,780,003			
	b	Less. accumulated depreciation	10b	(1,718,647)	74,258	10c	61,356
	11	Investments—publicly traded securities .			4,316,618	11	4,638,545
	12	Investments—other securities. See Part IV, line			0	12	180,000
	13	Investments-program-related. See Part IV, line	11		0	13	
	14	Intangible assets			0		
	15	Other assets. See Part IV, line 11			1,057,672		1,125,022
	16	Total assets. Add lines 1 through 15 (must equal			9,143,680		9,798,009
	17	Accounts payable and accrued expenses .			140,844		131,117
	18	Grants payable			3,871,142		3,865,583
	19	Deferred revenue			0	19	0
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability Complete			6,344	21	6,344
es	22	Loans and other payables to current and for			* • •	ĺ	
III		trustees, key employees, highest comper					
Liabilities		disqualified persons. Complete Part II of Schedi		,	0	22	0
_	23	Secured mortgages and notes payable to unrela			<u> </u>	23	0
	24	Unsecured notes and loans payable to unrelated			0	24	0
	25	Other liabilities (including federal income tax,	payable	s to related third			
		parties, and other liabilities not included on line of Schedule D				05	
					357,788		333,654
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958			4,376,118	20	4,336,698
Fund Balances		complete lines 27 through 29, and lines 33 an		(nere by and		ı	
au	27	Unrestricted net assets			3,937,853	27	4,455,054
Bal	28	Temporarily restricted net assets			511,700	28	527,649
Þ	29			. : · . · <u>.</u> ·	318,009	29	478,608
		Organizations that do not follow SFAS 117 (ASC 9 complete lines 30 through 34.	58), che	ck here ► 📋 and	:		
ts c	30	Capital stock or trust principal, or current funds			0	30	0
se	31	Paid-in or capital surplus, or land, building, or e		nt fund	0	31	0
Net Assets or	32	Retained earnings, endowment, accumulated in		1	0	32	0
let	33	Total net assets or fund balances		ľ	4,767,562	33	5,461,311
		Total liabilities and net assets/fund balances .			9,143,680	34	9,798,009

Page	1	2

Form 99	90 (2012)			Pa	ige 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u></u>			✓
1 '	Total revenue (must equal Part VIII, column (A), line 12)	1		6,81	6,108
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,57	6,854
3	Revenue less expenses. Subtract line 2 from line 1	3		23	39 <u>,</u> 254
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_	4,76	7,562
5	Net unrealized gains (losses) on investments	5		18	31,912
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		27	72,583
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		5,46	1,310
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			-	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			ļ	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ır	·	ì	
	Schedule O				
2a			2a	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were compared to the statement of the year were compared to the statement of the year were compared to the year we	oiled oi			
	reviewed on a separate basis, consolidated basis, or both:			}	
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	ed on a			
	separate basis, consolidated basis, or both:				
	☑ 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 or		1 1		
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	\checkmark	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain 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?		3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				l
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b	لييا	L
			Forr	n 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization	<u>-</u>						Employer ic	lentificatio	n number
Unite	d Way of Central Ma									104017
Pai			rity Status (All orga						nstruction	ons.
The (A church, conv	vention of church ribed in section	tion because it is: (Fones, or association of 170(b)(1)(A)(ii). (Attac	churches ch Sched	s describe ule E.)	ed in sec	tion 170	(b)(1)(A)(i).	
3 4										
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6 7										
8 9	An organization receipts from support from acquired by the	n that normally activities related gross investme e organization a	n section 170(b)(1)(A) receives: (1) more that if to its exempt funct int income and unrel fter June 30, 1975 Se	an 331/3% nons—sul lated bus ee sectio	6 of its subject to desiness tax n 509(a) (3	ipport fro certain ex xable ind 2). (Com	xceptions come (les plete Par	s, and (2) ss sectio t III.)	no mor n 511 ta	e than 331/3% of its
10 11	An organization	on organized an ne or more pub	operated exclusively of operated exclusive of the supported organ describes the type of the supported organs.	ely for th	ne benefit described	t of, to do	perform ion 509(a	the funct a)(1) or se	ions of, ection 50	9(a)(2). See section
e		ndation manage	II c Type III that the organization ers and other than one	is not co	ntrolled d	lirectly o	ındırectl	y by one	or more	
f	If the organization, organization, or	ation received a	a written determination							pe III supporting
g	following pers	ons?	he organization accep							
	(III) below,	the governing bo	ndirectly controls, eitlody of the supported of	organızat	ion? .		persons · ·	describe	dın (ıı) a	nd Yes No
	• •		on described in (i) abo							11g(ii)
	· •	-	a person described in							11g(iii)
[Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) is the c	organization sted in your document?	(v) Did y the orga col (i)	ou notify nization in of your port?	organizat (i) organi	is the tion in col zed in the S?	(vii) Amount of monetary support
			(see instructions))	Yes	No	Yes	No	Yes	No	
(A)										
(B)								_		
(C)									_	
(D)										
(E)										

0011000							
Part	II Support Schedule for Organiza	ations Descri	ibed in Secti	ons 170(b)(1	(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatioi	n failed to qua	alify under
•	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
Secti	on A. Public Support			<u> </u>			
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and				-		
	membership fees received. (Do not						
	include any "unusual grants ")	6,828,802	6,795,165	6,736,415	6,570,572	6,677,662	33,608,616
2	Tax revenues levied for the				-		
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	6,828,802	6,795,165	6,736,415	6,570,572	6,677,662	33,608,616
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly	į				!	
	supported organization) included on	į				,	
	line 1 that exceeds 2% of the amount shown on line 11, column (f)			!		1	
•		<u></u>					2,604,950
6 Secti	Public support. Subtract line 5 from line 4. on B. Total Support	Ĺ	L	ني بي		الــــــــــــــــــــــــــــــــــــ	31,003,666
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	6,828,802	6,795,165	6,736,415	6,570,572	6,677,662	33,608,616
8	Gross income from interest, dividends,	0,020,002	0,733,703	0,730,413	0,370,372	0,077,002	33,000,010
0	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	120,610	357,591	493,478	230,117	332,793	1,201,796
9	Net income from unrelated business				•	,	• • •
	activities, whether or not the business	1					
	is regularly carried on	l ol	o	o	0	o	0
10	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	53,487	500	0	0	0	53,987
11	Total support. Add lines 7 through 10						34,864,399
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the	-	i's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he		<u>-</u>	· · · · ·		· · · · ·	<u> </u>
Sect	ion C. Computation of Public Suppo				·		
14	Public support percentage for 2013 (line					14	88.93% %
15	Public support percentage from 2012 Sci 331/3% support test—2013. If the organi	nedule A, Parti	II, line 14 .		 Nuno 14 io 221		88.92% %
16a	box and stop here. The organization qua						
b	331/3% support test—2012. If the organization que						
D	check this box and stop here. The organ						
47-		•	-				
17a	10% or more, and if the organization me						
	Part IV how the organization meets the "						
	organization						
ь	10%-facts-and-circumstances test – 2						_
U	15 is 10% or more, and if the organiza						
	Explain in Part IV how the organization in						
	supported organization						. ▶ □
18	Private foundation. If the organization d	id not check a	box on line 13,	, 16a, 16b, 17a	, or 17b, chec	k this box and	see
	instructions						. ▶ □

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	_	•				
4	Tax revenues levied for the	["					
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities		1				
	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		-		ļ		
b	Amounts included on lines 2 and 3				j		
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			1			
_			-				
С 8	Add lines 7a and 7b	1 3 3 3 4 K. V B	BEFORE CARE		The sales and the sales are sales and the sales are sales are sales are sales are sales are sales are sales ar		
0	line 6)					2	
Secti	on B. Total Support	1	Anna managed and	N T TO THE PERSON	THE PARTY OF THE P	The contract of the contract o	
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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			İ			
	acquired after June 30, 1975						
C	Add lines 10a and 10b			-			
11	Net income from unrelated business				1		
	activities not included in line 10b, whether				1		
	or not the business is regularly carried on		 				
12	Other income. Do not include gain or				1		
	loss from the sale of capital assets				1		
40	(Explain in Part IV)		+	 	 	ļ	<u> </u>
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for t	he organizatio	n's first secon	d third fourth	or fifth tax v	L ear as a sectio	n 501(c)(3)
17	organization, check this box and stop he						
Secti	on C. Computation of Public Suppo			·		· · · · —	
15	Public support percentage for 2013 (line			3, column (f))		15	%
16	Public support percentage from 2012 Sc						%
	on D. Computation of Investment In						
17	Investment income percentage for 2013	(line 10c, colui	mn (f) dıvıded b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201						<u>%</u>
19a	331/3% support tests-2013. If the organ						
	17 is not more than 331/2%, check this box						_
b	331/3% support tests—2012. If the organi						
	line 18 is not more than 331/2%, check this						_
20	Private foundation. If the organization d	id not check a	l box on line 14	, 19a, or 19b, o	cneck this box	and see instru	ctions ► 📋

F	aa	е	4

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
Part II - Sec	ion B - Line 10 - United Way of Central Massachusetts, Inc. leases an office condominium it owns outright to							
other local	ther local non-profit agencies. The office is presently being used by the Southeast Asian Coalition free of charge.							
•								

14. GREATER WORCESTER COMMUNITY FOUNDATION FUNDS (CONTINUED)

Women's Initiative Fund in Honor of Lois B. Green

On October 30, 2009, the Organization established the Women's Initiative Fund (the "WI Fund") in Honor of Lois B. Green at GWCF. The WI Fund shall be used for support of the charitable or educational purposes of the Women's Initiative of the UWCM and its affiliated agencies. The WI Fund shall be maintained by

having a

market value of \$268,211 and \$252,784 as of June 30, 2013 and 2012, respectively. In accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 958-605, Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others, the market value of the Organization's initial contribution to the WI Fund is reflected as an asset ("Beneficial interest in trust") and is included in permanently restricted net assets on the Statement of Financial Position. Changes in the market value of the WI Fund are recorded as a temporarily restricted change in beneficial interest in trust on the statement of activities. As of June 30, 2013 and 2012, the Organization has permanently restricted cash and pledges receivable of \$200 and \$500 that will be contributed to the WI Fund at GWCF.

The Arthur J. Remillard, Jr. Fund

The Arthur J. Remillard, Jr. Fund (the "AJR Fund") is a donor-designated fund established at GWCF to provide financial support to the Organization. A three-person advisory board, consisting of the chief executive officer, a current or past president of the Board of Directors of United Way of Central Massachusetts, Inc. and a current or past president of the Board of Directors of GWCF, determines the annual pledge to the Organization. During 2013 and 2012, the advisory board awarded the Organization a total of \$23,239 and \$23,820, respectively. As of and for the years ended June 30, 2013 and 2012, the AJR Fund had a fair market value of \$566,317 and \$542,890, respectively.

15. COMMUNITY IMPACT AND WOMEN'S INITIATIVE

Community Impact grants of unrestricted funds to selected programs are determined annually by the Board of Directors based on recommendations from the Community Impact Committee. Women's Initiative grants and sponsorships are also determined by the Board of Directors based on recommendations from the Women's Initiative Community Investment Committee. Grants are payable on a monthly basis during subsequent fiscal years. Sponsorships are paid based on the timing of the sponsored events.

In accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 958, Not-for-Profit Entities, the Organization recognizes the full amount of the committed grant as an expense in the year in which the commitment is made.

13. EMPLOYEE BENEFIT PLAN

The Organization maintains a contributory retirement plan covering all eligible employees. Each year the Organization at its discretion may make an employer contribution to the plan. The employer's contribution is determined annually, by the Board of Directors. The employer's contribution charged to expense was \$32,101 and \$35,877 in 2013 and 2012, respectively.

In addition, incorporated into the plan are the provisions of Section 401(k) of the Internal Revenue Code, which allows employees to contribute to their accounts on a pretax basis. The Organization may make a discretionary match contribution up to a maximum of 2% of employees' annual compensation. The match contribution for 2013 and 2012 was \$17,575 and \$19,222, respectively.

14. GREATER WORCESTER COMMUNITY FOUNDATION FUNDS

The following funds, except as discussed, are considered assets of the Greater Worcester Community Foundation ("GWCF") and therefore are not included in the financial statements of the United Way of Central Massachusetts, Inc. The information is included for disclosure purposes only.

United Way of Central Massachusetts Fund

In August of 1987 the Organization established the United Way of Central Massachusetts Fund ("the Fund") at GWCF. The purpose of the Fund is to provide additional financial support for participating agencies of the Organization and to underwrite administrative costs of the Organization. The Fund consists of an amount contributed by the as of June 30, 2013 and

2012, respectively. In accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 958-605, Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others, the Organization's initial contribution to the Fund is reflected as an asset ("Beneficial interest in trust") and is included in unrestricted net assets on the Statement of Financial Position. Changes in market value of the Fund are recorded as an unrestricted change in beneficial interest in trust on the statement of activities.

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.
► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

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

	Using the organization's acquisition, a	Collections of A	Art, Historical T	reasures,	or Ot	her Similar A	Set	s (cor	tinu	ed)
3.	collection items (check all that apply):						signii	icam	use	oi ils
а	☐ Public exhibition			or exchang	e progi	rams				
b	Scholarly research		e 🗌 Other	, 						
С	☐ Preservation for future generations			_		_				_
4	Provide a description of the organizat XIII.	tion's collections a	nd explain how t	hey further t	the org	anızatıon's ex	empt	purpo	se in	Part
5	During the year, did the organization						ıılar			
	assets to be sold to raise funds rather	than to be mainta	ned as part of the	e organizatio	on's co	llection? .	. [] Ye	s [No
Part	IV Escrow and Custodial Arra									
	Complete if the organization 990, Part X, line 21.	answered "Yes"	to Form 990, P	art IV, line	9, or r	eported an a	mour	nt on I	orm	1
1a	Is the organization an agent, trustee,	, custodian or othe	er intermediary fo	or contributi	ons or	other assets	not			
								⊘ Ye	s 🗀	No
ь	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following ta	able						
	, ,						Amou	ınt		
С	Beginning balance				1c					6,344
d	Additions during the year				1d					0
е	Distributions during the year				1e					0
f	Ending balance				1f					6,344
2a	Did the organization include an amoun	nt on Form 990, Pa	rt X, line 21? .				. [✓ Ye	s 🗆	No
b	If "Yes," explain the arrangement in Pa	art XIII Check here	e if the explanation	n has been	provide	ed in Part XIII			✓]
Pari	V Endowment Funds.			_						
	Complete if the organization	answered "Yes"	to Form 990, P	art IV, line	10.					
		(a) Current year	(b) Prior year	(c) Two years	s back	(d) Three years ba	ack (e) Four	ears l	oack
1a	Beginning of year balance .	5,555,135	6,019,433	4,6	89,553	4,490,4	182		6,683	3,633
b	Contributions	181,567	6,484	4	18,617	111,9	940			0
С	Net investment earnings, gains, and					•				
	losses	623,123	(172,1 <u>1</u> 7)	1,2	05,679	361,4	196	(1	,927	,289)
d	Grants or scholarships		0		0		0			0
e	Other expenditures for facilities and					·				
	programs	(265,579)	(259,219)	(25	6,469)	(245,5	64)		(237	,552)
f	Administrative expenses	(47,292)	(39,446)		7,947)	(28,8	01)		(28	,310)
g	End of year balance	6,046,954	5,555,135	6,0	19,433	4,689,5	553		4,490),482
2	Provide the estimated percentage of t	the current year en	d balance (line 1g	, column (a)) held a	as.				
а	Board designated or quasi-endowme		2%							
b	Permanent endowment ►	8%	. -							
С	Temporarily restricted endowment ▶	0%								
	The percentages in lines 2a, 2b, and 2	2c should equal 10	0%.							
3a	Are there endowment funds not in th	e possession of th	e organization tha	at are held a	and ad	ministered for	the	_		
	organization by:						_		/es	No
	(i) unrelated organizations						. [3a(i)	✓	
	(ii) related organizations						. [3a(ii)		
b	If "Yes" to 3a(ii), are the related organ	iizations listed as re	equired on Sched	ule R? .			. [3b		
4	Describe in Part XIII the intended use				_					
Par	VI Land, Buildings, and Equip	oment.								
	Complete if the organization	n answered "Yes'	' to Form 990, F	art IV, line	11a. S	See Form 990), Par	t X, lır	ne 10	0.
	Description of property	(a) Cost or ot	ner basis (b) Cost of	or other basis	(c)	Accumulated	(4	f) Book	value	!
		(investm	ent) (o	ther)	de	epreciation				
1a	Land									
b	Buildings			367,137		367,137				0
C	Leasehold improvements			774,288		724,284			50	0,004
d	Equipment			433,662		423,965				9,697
е	Other			204,916		203,261			-	1,655
Total.	Add lines 1a through 1e. (Column (d) i	must equal Form 9	90, Part X, column	n (B), line 10	(c).)	▶			6	1,356

Part VII	Investments — Other Securities Complete if the organization ans		m 990.	Part IV. line	11b. See Form	990. Part X. line 12
	(a) Description of security or categorial (including name of security)		T	Book value	(c) Meth	nod of valuation of-year market value
(1) Financial	derivatives					
(2) Closely-I	neld equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)			ļ			·- -
(E)						
(F) (G)			-			
(G) (H)			<u> </u>			
	(b) must equal Form 990, Part X, col (B) line 12) ▶		ļ			
Part VIII	Investments—Program Relate		1	<u>_</u>		
	Complete if the organization ans		m 990,	Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment		1	Book value	(c) Meth	nod of valuation of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)]		 -	
(8)						· · · · · · · · · · · · · · · · · · ·
(9)			l	- 		 -
	(b) must equal Form 990, Part X, col (B) line 13)				····	
Part IX	Other Assets.					
	Complete if the organization ans		m 990,	Part IV, line	11d. See Form	
		(a) Description				(b) Book value
	ial in trust - United Way of Central Mass	achusetts Fund held at	the Gre	ater Worcester		856,811
	inity Foundation.		l l - l - A A			
	ial in trust - Women's Initiative Fund in	Honor of Lois B. Green	neio at t	ne Greater wo	rcester	268,211
	inity Foundation.			····		
(5)						
(7)				 		
(8)						
(9)						
Total. (Colu	ımn (b) must equal Form 990, Part X, o	col. (B) line 15.)		<u></u>	<u>.</u> . >	1,125,022
Part X	Other Liabilities.					
	Complete if the organization ans	swered "Yes" to For	m 990,	Part IV, line	11e or 11f. See	Form 990, Part X,
1.	line 25.	(b) Book value				
	(a) Description of liability	(b) Book value				
	designated pledges	2.	33,654			
(3)	uesignateu pieuges	<u> </u>	33,034			
(4)		 	$\neg \neg$			
(5)						
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col (B) line 25.) ▶		33,654			
Liability for	or uncertain tax positions. In Part XIII, pro-	vide the text of the footn	ote to th	e organization':	s tinancial statemei	nts that reports the

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

Part				Return.	<u></u>
	Complete if the organization answered "Yes" to Form 990, F				2 400 045
1	Total revenue, gains, and other support per audited financial statements	• •		1	6,428,845
	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments	2a	101010		
a	Donated services and use of facilities	2b	181,912		
b	_	2c	0		
Q C	Recoveries of prior year grants	2d	(706,519)		
d	Add lines 2a through 2d	20	(700,519)	2e	(524,607)
е 3	Subtract line 2e from line 1	•		3	6,953,452
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	İ	 		0,333,432
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,513		
b	Other (Describe in Part XIII.)	4b	(172,857)		
C				4c	(137,344)
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	6,816,108
Part				r Return	
	Complete if the organization answered "Yes" to Form 990, F				
1				1	5,735,096
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				3,,
- а	Donated services and use of facilities	2a	0	ļ.	
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII)	2d	0		
e		-		2e	0
3	Subtract line 2e from line 1			3	5,735,096
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,513		
ь	Other (Describe in Part XIII)	4b	806,245		
С	· ·			4c	841,758
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	6,576,854
2; Part	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part IV - United Way of Central Massachusetts served as a fiscal agent for the Diat	to pro	ovide any additional in	formation.	
The to	al liability as of June 30, 2012 was \$6,344.				
	V - Endowment Funds - Line 4:				·
	come generated from the organization's endowment funds are used to subsidia			enses and	United Way of
Centra	Massachusetts and the Women's Initiative Program of the United Way of Cen	tral Ma	assachusetts.		
3. Pari	XI line 2d Other - Amounts included on line 1 but not on Form 990, Part VIII, III	ne 12:			
	Designated donations - (\$786,702)				
	Professional fund raising fees charged by other organizations - (\$19,543)				
	Change in value of a beneficial interest in trust - \$99,726		•••••		
	Total = (\$706,519)				

Page	į

Part XIII Supplemental Information (continued)
4 Part XI line 4 - Amounts included on Form 990, Part IX, line 25, but not on line 1: - 4b Other -
Adjustment for gain from collection activity from prior year campaigns = \$172,857
United Way of Central Massachusetts uses a historical average to estimated the uncollectible expense for the current year
campaign. This adjustments reflects the impact of actual collections as compared to the original estimate.
·
5. Part XII line 4 - Amounts included on Form 990, Part IX, line 25, but not on line 1: - 4b Other -
Designated donations - \$786,702
Professional fund raising fees charged by other organizations - \$19,543
Total = \$806,245

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Departm	ent of the Treasury Revenue Service			ach to Form				Open to Public
	f the organization	Information at	out Schedule G (For	rm 990 or 990)-EZ) and its	instructions is at www	Employer identific	Inspection
	•	Maaaahuaatta I-	_				1 ' '	
	Eundrai	Massachusetts, Inc	Complete if the	a organiza	ation anew	rered "Ves" to F	orm 990, Part IV, li	2 <u>104017</u>
Part	48	0-EZ filers are r	•	-		vereu res tor	Om 500, rait w, n	110 17.
1						owing activities C	heck all that apply.	
' a	Mail solicit	=	ni raiseu iurius ti			on of non-governi		
b		ations id email solicitatio	no			on of government	_	
_	✓ Phone solu		115			fundraising events		
C	=			g L	J Special i	unuraising events	•	
d 2a	✓ In-person		tten or oral agree	ement with	any individ	dual (including offi	cers, directors, trust	ees
La	or key employ	ees listed in Form	990. Part VII) or	entity in co	onnection v	with professional f	undraising services?	✓ Yes ☐ No
b	If "Yes," list th		d individuals or e	ntities (fun			ents under which the	
	(i) Name and addre		(ii) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
				Yes	No			
1 A	ction for Boston	Comm Dev.	COMECC/CFC	✓		105,775	12,761	93,014
2								
3								
4								
5								
6		· 						
7		·			-			
8		<u>.</u>		<u> </u>				
9								
			ļ	<u> </u>	ļ .			
10								
Total		_		tered or lic		solicit contribution	s or has been notifie	ed it is exempt from
Mass	achusetts							
				·				•••••
				· · · · · · · · · · · · · · · · · · ·				
			••••			· ···		
				·				
								

	•	gross receipts greater that	ι ψο,υυυ.			
	_		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
x	2 3	Less: Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
1	5	Noncash prizes				
euses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				 -
	10 11	Direct expense summary. Ad Net income summary. Subtra	d lines 4 through 9 in			
Pa	rt III	Gaming. Complete if the	organization answer	ered "Yes" to Form 990), Part IV, line 19, or re	eported more
		than \$15,000 on Form 99	90-EZ, line 6a.			
						
enne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			(c) Other gaming	
	•				(c) Other gaming	
	2	Gross revenue			(c) Other gaming	
	•				(c) Other gaming	
Direct Expenses Revenue	2	Cash prizes			(c) Other gaming	
	2	Cash prizes Noncash prizes	(a) Bingo	bingo/progressive bingo		
	3	Cash prizes Noncash prizes Rent/facility costs		bingo/progressive bingo	(c) Other gaming Yes % No	
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses .	(a) Bingo	bingo/progressive bingo Yes % No	☐ Yes%	
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	(a) Bingo Yes No d lines 2 through 5 in	bingo/progressive bingo Yes % No Column (d)	☐ Yes % ☐ No	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	(a) Bingo Yes No d lines 2 through 5 in Subtract line 7 from	bingo/progressive bingo Yes % No column (d)	☐ Yes% ☐ No	col (a) through col (c))
	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor Direct expense summary. Ad Net gaming income summary. Inter the state(s) in which the oresist the organization licensed to organization licensed to organization.	(a) Bingo Yes	bingo/progressive bingo Yes % No column (d)	☐ Yes % ☐ No	col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor Direct expense summary. Ad Net gaming income summary. Inter the state(s) in which the oresist the organization licensed to organization licensed to organization.	(a) Bingo Yes	bingo/progressive bingo Yes % No column (d) line 1, column (d) aming activities. es in each of these states	☐ Yes % ☐ No	col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8 a Is	Cash prizes	(a) Bingo Yes	bingo/progressive bingo Yes % No column (d) line 1, column (d) aming activities. es in each of these states	☐ Yes% ☐ No▶	col (a) through col (c))

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

Schedul	lle G (Form 990 or 990-E∠) 2013		F	Page 3
11 12	Does the organization operate gaming activities with nonmembers?		res □	_
13	Indicate the percentage of gaming activity operated in:	ш.	C3 _	, 140
а	The organization's facility			%
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ►			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		′es □] No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$	_		•
С	If "Yes," enter name and address of the third party:			
	Name ►			
	Address ►			
16	Gaming manager information.			
	Name ►			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			-
	□ Director/officer □ Employee □ Independent contractor			
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		′es □) No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provid additional information (see instructions).			
Part 1	- 2b column iii -			
ABCD), Inc. (Action for Boston Community Development, Inc.) administers the Commonwealth of Massachusetts Employee (Charita	ble	
	aign (COMECC) and the regional Combined Federal Campaign (CFC). ABCD, Inc. collects and distributes contribution			
these	campaigns net of its fundraising fees.			
·				

Grants and Other Assistance to Organizations,

OMB No 1545-0047

Open to Public Inspection 2012

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. **%** □ Employer identification number ✓ Yes 04-2104017 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. the selection criteria used to award the grants or assistance? General Information on Grants and Assistance Jnited Way of Central Massachusetts, Inc. Department of the Treasury Internal Revenue Service Name of the organization Part II

Par IV, line 21, for any recipient that received fillore than \$5,000. Fait in call be outpilicated if additional space is needed.	y recipient man	eceived illore il	Idii \$3,000. Faiti	ii cari be dupiica	וופת זו מתמונוטוזמו	phace is liceded.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Abby Kelley Foster House					,		
52 High St. Worcester, MA 01609	04-2648411	501(c)(3)	7,953				Donor Designated
(2) Abby Kelley Foster House							
52 High St. Worcester, MA 01609	04-2648411	501(c)(3)	3,327				Donor Desg, 3rd Pty
(3) AIDS Project Worcester							
85 Green Street Worcester, MA	04-2970467	501(c)(3)	3,630				Donor Designated
(4) AIDS Project Worcester							
85 Green Street Worcester, MA	04-2970467	501(c)(3)	2,364				Donor Desg, 3rd Pty
(5) American Lung Association ME							
122 State St. Augusta, ME 04330	01-0211531	501(c)(3)	6,313				Donor Designated
(6) American Red Cross Central MA							
2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	23,751				Donor Designated
(7) American Red Cross Central MA							
2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	7,833				Donor Desg, 3rd Pty
(8) American Red Cross Central MA							
2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	173,000				Program Operating
(9) Autism Resource Center Central							
MA 71 Sterling St W Boylston, MA	04-2300014	501(c)(3)	3,300				Donor Designated
(10) Autism Resource Center Central							
MA 71 Sterling St W Boylston, MA	04-2300014	501(c)(3)	2,684				Donor Desg, 3rd Pty
(11) Big Brothers Big Sisters Central							
MA/Metro West Worcester, MA	04-2317926	501(c)(3)	7,550				Donor Designated
(12)					_		
9 Enter total number of section 501(c)(3) and dovernment of	501(c)(3) and gov	ernment organiza	rganizations listed in the line 1 table	ne 1 table			4
	יים ויים איים				· ·		

Schedule I (Form 990) (2012)

Cat No 50055P

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

Schedule I (F	Schedule I (Form 990) (2012)				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Page 2
Part III	Grants and Other Assistance to Individuals in Part III can be duplicated if additional space is		nited States. Con	plete if the organiz	in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line needed.	-orm 990, Pan IV, line zz.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
8						
ო						
4						
r.						
9						
-						
Part IV	Supplemental Information. Complete this par information.	e this part to pro	vide the informatio	n required in Part I,	line 2, Part III, column (b	t to provide the information required in Part I, line 2, Part III, column (b), and any other additional
1. 382 age	1. 382 agencies received donor designations totaling \$786,702 for this fiscal year.	6,702 for this fiscal	year.			
2. Donor C	2. Donor Designation Policy: Organizations receiving donor designated contributions undergo a screening process prior to the distribution of funds. Screening	nor designated con	tributions undergo a	screening process prio	r to the distribution of funds.	Screening
includes	includes verification of current status as an IRS Code Section 501	Section 501(c)(3) nor	nprofit organization a	(c)(3) nonprofit organization and verification of PATRIOT Act compliance.	IIOT Act compliance.	
3. Grant M	3. Grant Monitoring Policies: Grant awards are determined through	ed through an open	and competitive proc	ess with two phases. I	an open and competitive process with two phases. The first phase determines the eligibility of	eligibility of
the organi	the organization to qualify for funding. Organizational documents including program description, Board of Directors' roster, operating budget, financial review or	cuments including	program description,	Board of Directors' ros	ster, operating budget, financi	al review or
audit, 501(audit, 501(c)(3) determination letter, and a non-discrimination policy		ired. If accepted into	Phase II, the applicant	are required. If accepted into Phase II, the applicant organization submits a detailed program	ed program
application	application with specific outcome measurements to ensure the fund		ams will achieve max	mum community impa	ed programs will achieve maximum community impact in the specified focus area. Programs	Programs
receive fur	receive funding through recommendations from volunteer committe	r committees with fi	inal approval by the fu	ull Board of Directors.	es with final approval by the full Board of Directors. The funded programs are monitored	nitored
throughou	throughout the program cycle through regular reporting on progress toward outcomes and United Way coordinated site visits.	on progress toward	outcomes and United	Way coordinated site	visits.	
(continued	(continued on Schedule O.)					Schedule I (Form 990) (2012)

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

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

► Attach to Form 990.

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OMB No 1545-0047

Open to Public Inspection

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

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. **%** □ **Employer identification number** ✓ Yes 04-2104017 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? United Way of Central Massachusetts, Inc.

Part I General Information on Grants and Assistance Department of the Treasury Internal Revenue Service Name of the organization

Part II

railly, lille 21, 101 any leciple in lattecerved fillore than \$3,000.1 are in oar 50 augmented	iy iccipialit tilat i	ברפוגפת וווסופ נו	lail #0,000. I ail I	and po adding	200000000000000000000000000000000000000	opaco io ilocaci	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Big Brothers Big Sisters Central							70
MA/Metro West Worcester, MA	04-2317926	501(c)(3)	2,495				Donor Desg, and Pry
(2) Big Brothers Big Sisters Central							
MA/Metro West Worcester, MA	04-2317926	501(c)(3)	78,000				Program Operating
(3) Boy Scouts Mohegan Council							
19 Harvard St. Worcester, MA 01609	04-2105867	501(c)(3)	18,752				Donor Designated
(4) Boy Scouts Mohegan Council							
19 Harvard St. Worcester, MA 01609	04-2105867	501(c)(3)	2,150				Donor Desg, 3rd Pty
(5) Boys & Girls Club of Worcester							
65 Tainter St. Worcester, MA 01610	04-2105851	501(c)(3)	21,872				Donor Designated
(6) Boys & Girls Club of Worcester							
65 Tainter St. Worcester, MA 01610	04-2105851	501(c)(3)	5,278				Donor Desg, 3rd Pty
(7) Boys & Girls Club of Worcester					_		
65 Tainter St. Worcester, Ma 01610	04-2105851	501(c)(3)	4,782			-	Minor Capital
(8) Boys & Girls Club of Worcester							
65 Tainter St. Worcester, MA 01610	04-2105851	501(c)(3)	35,000				Program Operating
(9) Cape Cod Academy, PO Box 469							
Osterville, MA 02655	04-2592472	501(c)(3)	2,600				Donor Designated
(10) CASA Project, Inc. 100 Grove St.							
Worcester, MA 01605	04-2711865	501(c)(3)	3,369				Donor Designated
(11) CASA Project, Inc. 100 Grove St.							
Worcester, MA 01605	04-2711865	501(c)(3)	199				Donor Desg, 3rd Pty
(12)							

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

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

Cat No 50055P

Schedule I (Form 990) (2012)

9

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

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

2012

OMB No 1545-0047

Open to Public Inspection

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service	► Attach to Form 990.	Inspection
Name of the organization	Employe	Employer identification number
United Way of Central Massachusetts, Inc.	Massachusetts, Inc.	04-2104017
Part I Genera	Part I General Information on Grants and Assistance	
1 Does the orga	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	e, and
the selection	the selection criteria used to award the grants or assistance?	· · · · Yes □ No
2 Describe in Pa	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	:
Part Grants	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	rered "Yes" to Form 990,
Part IV,	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	

Carbonic Charities Worcester, MA 101605 54,000 54,0	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
s. Worc. County 64-2103979 501(c)(3) 2 vorcester, MA 04-2103979 501(c)(3) 2 vorcester, MA 04-2103979 501(c)(3) 4 vorcester, MA 04-2103979 501(c)(3) 4 vorcester, MA 04-2191448 501(c)(3) 26 sster, MA 04-2791448 501(c)(3) 26 ster, MA 04-279148 501(c)(3) 3 ster, MA 04-279148 501(c)(3) 3 ster, MA 04-2791856 501(c)(3) 3 ster, MA 04-2105856 501(c)(3) 3 ster, Ma 04-2105856 501(c)(3) 3 <td>(1) CASA Project, Inc. 100 Grove St. Worcester, MA 01605</td> <td>04-2711865</td> <td>501(c)(3)</td> <td>54,000</td> <td></td> <td></td> <td></td> <td>Program Operating</td>	(1) CASA Project, Inc. 100 Grove St. Worcester, MA 01605	04-2711865	501(c)(3)	54,000				Program Operating
04-2103979 501(c)(3) 4 04-2103979 501(c)(3) 4 04-2791448 501(c)(3) 26 04-2791448 501(c)(3) 26 04-2791448 501(c)(3) 26 04-2791856 501(c)(3) 26 04-2105856 501(c)(3) 26	(2) Catholic Charities Worc. County	04.2103979	501(c)(3)	23 076				Donor Designated
04-2103979 501(c)(3) 4 04-2791448 501(c)(3) 04-2791448 501(c)(3) 04-2791448 501(c)(3) 26 04-2791448 501(c)(3) 26 04-2705856 501(c)(3) 04-2105856 501(c)(3)	(3) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	6,168				Donor Desq, 3rd Pty
04-2791448 501(c)(3) 04-2791448 501(c)(3) 04-2791448 501(c)(3) 04-2795856 501(c)(3) 04-2105856 501(c)(3)	(4) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	41,000				Program Operating
04-2791448 501(c)(3) 04-2791448 501(c)(3) 04-2791448 501(c)(3) 04-2105856 501(c)(3) 04-2105856 501(c)(3)	(5) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	3,795				Donor Designated
04-2791448 501(c)(3) 26 04-2791448 501(c)(3) 26 04-2105856 501(c)(3) 04-2105856 501(c)(3)	(6) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	900				Donor Desq, 3rd Pty
04-2791448 501(c)(3) 26 04-2105856 501(c)(3) 04-2105856 501(c)(3)	(7) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	2,488				Minor Capital
04-2105856 501(c)(3) 04-2105856 501(c)(3) 04-2105856 501(c)(3)	(8) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	263,000				Program Operating
04-2105856 501(c)(3) 04-2105856 501(c)(3)	(9) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	3,301				Donor Designated
Children's Friend, Inc. 21 Cedar et Worcester, MA 01609 04-2105856 501(c)(3)	(10) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	3,005				Donor Desq, 3rd Pty
	(11) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	3,824				Minor Capital
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table		501(c)(3) and gor		tions listed in the li	ine 1 table			4 0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	For Paperwork Reduction Act Notice. s	see the Instruction	is for Form 990.		C	at No 50055P		Schedule I (Form 990) (2012)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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Open to Public Inspection **%**01

Employer identification number

United Way of Central Massachusetts Inc	Jul.						04-2104017
Part Ceneral Information on Grants and Assistance	on Grants and	Assistance					
Does	ain records to sub	stantiate the amou	nt of the grants or	assistance, the g	antees' eligibility for	or the grants or assistance	e, and
the selection criteria used to award the grants or assistance?	award the grants	or assistance?					· · · · Yes \
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedur	es for monitoring t	he use of grant fur	nds in the United	States.		
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Go	vernments and received more the	Organizations i	n the United St	ates. Complete in ted if additional s	the organization answapace is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(e) Amount of non- cash assistance (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Children's Friend, Inc. 21 Cedar							
Street Worcester, MA 01609	04-2105856	501(c)(3)	26,000				Program Operating
(2) Clark University 950 Main St.							
Worcester, MA 01610	04-2111203	501(c)(3)	2,500				Donor Designated
(3) Clark University 950 Main St.	i 		,				1
Worcester, MA 01610	04-2111203	501(c)(3)	52				Donor Desg, 3rd Pty
(4) Clark University 950 Maın St.							
Worcester, MA 01610	04-2111203	501(c)(3)	14,000				Program Operating
(5) Colleges of Worc. Consortium							
484 Main St #500 Worc. MA 01608	23-7055676	501(c)(3)	34,000				Program Operating
(6) Community Builders Plumley Vil							
95 Berkeley Street, Boston MA 02116	04-2324773	501(c)(3)	15,000				Program Operating
(7) Community Healthlink, Inc.							
72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	6,308				Donor Designated
(8) Community Healthlink, Inc.	-						
72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	972				Donor Desq, 3rd Pty
(9) Community Healthlink, Inc.							
72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	120,000				Program Operating
(10) Community Legal Aid							
405 Main St Worcester, MA 01608	04-2446242	501(c)(3)	3,201				Donor Designated
(11) Community Legal Aid							

Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

Cat. No 50055P

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4,083

501(c)(3)

04-2446242

405 Main St Worcester, Ma 01608 (12)

Schedule I (Form 990) (2012)

9

Minor Capital

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

2012

OMB No 1545-0047

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

▶ Attach to Form 990.

United Way of Central Massachusetts, Inc.

Part I General Information on Grants and Assistance

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection **Employer identification number**

04-2104017

1 Does the organiza	tion mainta	in records to subs	tantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility fo	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	1
the selection criter	ria used to	the selection criteria used to award the grants or assistance?	or assistance?					· · · · Yes · ·
2 Describe in Part IV	√ the organi	zation's procedure	es for monitoring t	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ds in the United	States.		
Part II Grants and Part IV, line	1 Other As	Grants and Other Assistance to Governmer Part IV, line 21, for any recipient that received	vernments and eceived more th	Organizations i	n the United St I can be duplica	hts and Organizations in the United States. Complete if the organization more than \$5,000. Part II can be duplicated if additional space is needed.	f the organization answ space is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	rganization	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Community Legal Aid	MA 01608	04-2446242	501(c)(3)	82.500				Program Operating
(2) Dana Farber Cancer Institute 450 Brookline Ave. Boston, MA 02215	nstitute 1, MA 02215	04-2263040	501(c)(3)	234				Donor Designated
(3) Dana Farber Cancer Institute 450 Brookline Ave. Boston, MA 02215	nstitute 1, MA 02215	04-2263040	501(c)(3)	8,635				Donor Desg, 3rd Pty
(4) Dismas House of MA PO Box 30125 Worcester, MA 01603	MA 01603	54-2075825	501(c)(3)	465				Donor Designated
(5) Dismas House of MA PO Box 30125 Worcester, MA 01603	MA 01603	54-2075825	501(c)(3)	43,000		·		Program Operating
(6) EcoTarium 222 Harrington Way Worc. MA 01604	MA 01604	04-2105868	501(c)(3)	1,008				Donor Designated
(7) EcoTarium 222 Harrington Way Worc. MA 01604	MA 01604	04-2105868	501(c)(3)	2000				Program Sponsorship
(8) Edward M. Kennedy Health 2000 Century Dr. Worcester, MA	Health er, MA	04-2153817	501(c)(3)	2,821				Donor Designated
(9) Edward M. Kennedy Health 2000 Century Dr. Worcester, MA	Health er, MA	04-2153817	501(c0(3)	8.2				Donor Designated
(10) Edward M. Kennedy Health 2000 Century Dr. Worcester, MA	Health er, MA	04-2153817	501(c)(3)	3,468				Minor Capital
(11) Edward M. Kennedy Health 2000 Century Dr. Worcester, MA	Health er, MA	04-2153817	501(c)(3)	30,000				Program Operating
(12)								
2 Enter total numbe	r of section	Enter total number of section 501(c)(3) and government	ernment organizat	organizations listed in the line 1 table	ne 1 table			\$ •

Schedule I (Form 990) (2012)

Cat. No 50055P

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

Name of the organization

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

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

► Attach to Form 990.

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OMB No 1545-0047

° □ **Employer identification number** ✓ Yes 04-2104017 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part General Information on Grants and Assistance United Way of Central Massachusetts, Inc.

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

its and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.	(h) Purpose of grant or assistance	Donor Designated	Donor Desg, 3rd Pty	Program Operating	Donor Designated	Donor Desg, 3rd Pty	Program Operating	Donor Designated	Donor Desg, 3rd Pty	Minor Capital	Program Operating	Donor Designated		4
nts and Organizations in the United States. Complete if the organization answ more than \$5,000. Part II can be duplicated if additional space is needed.	(g) Description of non-cash assistance													
tates. Complete ated if additional	(e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other)													
in the United Si Il can be duplica	(e) Amount of non- cash assistance													line 1 table
Organizations lan \$5,000. Part	(d) Amount of cash grant	5,312	2,743	52,000	520	1,219	18,000	2,034	104	000'\$	114,500	2,278		tions listed in the
	(c) IRC section if applicable	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)		ernment organiza
ssistance to Go	(b) EIN	04-2545221	04-2545221	04-2545221	04-2500932	04-2500932	04-2500932	04-2485308	04-2485308	04-2485308	04-2485308	04-2103767		501(c)(3) and gov
Part II Grants and Other Assistance to Governmer Part IV, line 21, for any recipient that received	(a) Name and address of organization or government	(1) Elder Services of Worcester 411 Chandler St. Worcester, MA	(2) Elder Services of Worcester 411 Chandler St. Worcester, MA	(3) Elder Services of Worcester 411 Chandler St. Worcester, MA	(4) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	(5) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	(6) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	(7) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	(8) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	(9) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	(10) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	(11) Family Services of Central MA 31 Harvard St. Worcester, MA 01609	(12)	2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2012)

Cat. No 50055P

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

Grants and Other Assistance to Organizations,

OMB No 1545-0047

Open to Public Inspection	Action and and
	7.7

(1066 11107)	Governments, and Individuals in the United States		N
	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	Open to Public	Public
Department of the Treasury Internal Revenue Service	► Attach to Form 990.	Inspection	tion
Name of the organization		Employer identification number	ē
United Way of Central Massachusetts, Inc.	Massachusetts. Inc.	04-2104017	
Part Genera	Part I General Information on Grants and Assistance		
1 Does the orga	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	stance, and	
the selection (nce?	sa√	% □
2 Describe in Pa	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Part Grants	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	answered "Yes" to Fo	orm 990,
Part IV,	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.		

Par IV, line 21, for any recipient that received thore than \$0,000. Fail in call be outpilicated it additional space is recoved.	y recipient mat i	received more u	lari \$3,000. rait	II call be dupile	ated II additionial	space is liceded.	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Family Services of Central MA			1				6
31 Harvard St. Worcester, MA 01609	04-2103767	501(c)(3)	52				Donor Desg, 3rd Pty
(2) Family Services of Central MA							
31 Harvard St. Worcester, MA 01609	04-2103767	501(c)(3)	000'09				Program Operating
(3) Friendly House, Inc. 36 Wall St.							
Worcester, MA 01604	04-2104239	501(c)(3)	13,800				Donor Designated
(4) Friendly House, Inc. 36 Wall St.							
Worcester, MA 01604	04-2104239	501(c)(3)	2,425				Donor Desg, 3rd Pty
(5) Friendly House, Inc. 36 Wall St.							
Worcester, MA 01604	04-2104239	501(c)(3)	5,000				Minor Capital
(6) Friendly House, Inc. 36 Wall St.							
Worcester, MA 01604	04-2104239	501(c)(3)	26,000				Program Operating
(7) Girls Incorporated of Worcester							
125 Providence St. Worcester, MA	04-2123666	501(c)(3)	8,948				Donor Designated
(8) Girls Incorporated of Worcester							
125 Providence St. Worcester, MA	04-2123666	501(c)(3)	1,719				Donor Desg, 3rd Pty
(9) Girls Incorporated of Worcester							
125 Providence St. Worcester, MA	04-2123666	501(c)(3)	1,646				Minor Capital
(10) Girls Incorporated of Worcester							
125 Providence St. Worcester, MA	04-2123666	501(c)(3)	80,000				Program Operating
(11) Girls Incorporated of Worcester							
125 Providence St. Worcester, MA	04-2123666	501(c)(3)	3,000				Program Sponsorship
(12)							
2 Enter total number of section 501(c)(3) and government of	501(c)(3) and gov	vernment organiza	roanizations listed in the line 1 table	ine 1 table			·
	7-1/-1						

Schedule I (Form 990) (2012)

Cat No 50055P

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

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

OMB No 1545-0047 2012

Open to Public Inspection

Name of the organization						EMP	Employer identification number
United Way of Central Massachusetts, Inc.	Пc,						04-2104017
Part General Information on Grants and Assistar	on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ain records to subs	stantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility fo	or the grants or assistar	ce, and
the selection criteria used to award the grants or assistance?	award the grants	or assistance?				Yes	· · · · Ves
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedur	es for monitoring t	he use of grant fur	nds in the United	States.		
Part II Grants and Other Assistance to Governmen Part IV, line 21, for any recipient that received	ssistance to Go	vernments and received more the	Organizations i	n the United Solic II can be duplic	its and Organizations in the United States. Complete if the organization more than \$5,000. Part II can be duplicated if additional space is needed.	the organization ans space is needed.	its and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(a) Amount of non- (book, FMV, appraisal, (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Guild of St. Agnes 133 Granite			0,000				Potos Constitution of the constitution of the
Street Worcester, MA 01604	04-2104267	501(c)(3)	3,612				Donor Designated
(2) Guild of St. Agnes 133 Granite							
Street Worcester, MA 01604	04-2104267	501(c)(3)	416				Donor Desg, 3rd Pty
(3) Guild of St. Agnes 133 Granite							
Street Worcester, MA 01604	04-2104267	501(c)(3)	30,000				Program Operating
(4) Jewish Family Services of Worc.							
646 Salisbury St. Worcester, MA	04-2104350	501(c)(3)	5,345				Donor Designated

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

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

Cat. No 50055P

Schedule I (Form 990) (2012)

5

Program Operating

Donor Designated

Donor Desg, 3rd Pty

1,040

501(c)(3)

04-2104350

(5) Jewish Family Services of Worc.

646 Salisbury St. Worcester, MA

(6) Jewish Family Services of Worc.

646 Salisbury St. Worcester, MA

(7) Latino Education Institute

30,000

501(c)(3)

04-2104350

52

501(c)(3)

22-3248067

486 Chandler St, Worcester, MA

(8) Latino Education Institute

Program Operating

Program Operating

Donor Designated

Program Operating

15,356

501(c)(3)

04-2483679

545 Westminster St. Fitchburg, MA

(9) LUK Crisis Center, Inc.

486 Chandler St, Worcester, MA

10) Lutheran Social Services NE

52

501(c)(3)

04-2496563

14 E Worcester St, Ste 300, Worc MA

40,000

501(c)(3)

04-2496563

4 E Worcester St, Ste 300, Worc MA

11) Lutheran Social Services NE

105,631

501(c)(3)

22-3248067

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

United Way of Central Massachusetts, Inc.

Part I General Information on Grants and Assistance

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

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

▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

04-2104017

r Assistance to Gover			nds in the United .	oldies.		
address of organization (b) EIN (a	rnments and	Organizations i	in the United St	ates. Complete it	f the organization answ space is needed.	vered "Yes" to Form 990,
han of Marcacter	(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
67 Lincoln St. Worcester, MA 01605 03-0385377	501(c)(3)	4,674				Donor Designated
-	501(c)(3)	27,000				Program Operating
(3) Nichols College 124 Center Road, Dudley, MA 01571 04-2104778	501(c)(3)	10,000				Donor Designated
(4) Oak Hill CDC 74 Providence St. Worc. MA 01604 22-2599363	501(c)(3)	1,131				Donor Designated
	501(c)(3)	33,000				Program Operating
	501(c)(3)	5,759				Donor Designated
ices	501(c)(3)	260				Donor Desg, 3rd Pty
(8) Pernet Family Health Services 237 Millbury St. Worcester, MA 04-2453851	501(c)(3)	34,500				Program Operating
(9) Rainbow Child Development 10 Edward Street Worcester, MA 10 Edward Street Worcester, MA	501(c)(3)	3,122				Donor Designated
(10) Rainbow Child Development 10 Edward Street Worcester, MA 04-2507815	501(c)(3)	208				Donor Desg, 3rd Pty
(11) Rainbow Child Development 10 Edward Street Worcester, MA 04-2507815	501(c)(3)	2,000				Minor Capital

Schedule I (Form 990) (2012)

Cat. No 50055P

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

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

OMB No 1545-0047 2012

Open to Public Inspection

▶ Attach to Form 990.

№ Employer identification number ✓ Yes 04-2104017 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? United Way of Central Massachusetts, Inc.

Part I General Information on Grants and Assistance

 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 	
2 Desi	

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ecipient that r	eceived more the	ıan \$5,000. Part∣	I can be duplica	ated if additional s	space is needed.	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Rainbow Child Development 10 Edward Street Worcester, MA	04-2507815	501(c)(3)	49,000				Program Operating
(2)							
(3) Regional Environmental Council							
PO Box 255 Worcester, MA 01613	04-6364350	501(c)(3)	624				Donor Designated
(4) Regional Environmental Council							
PO Box 255 Worcester, MA 01613	04-6364350	501(c)(3)	2,394				Minor Capital
(5) Regional Environmental Council							
PO Box 255 Worcester, MA 01613	04-6364350	501(c)(3)	26,000				Program Operating
(6) Seven Hills Foundation							
81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	152				Donor Designated
(7) Seven Hills Foundation							
81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	26				Donor Desg, 3rd Pty
(8) Seven Hills Foundation							
81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	2,500				Minor Capital
(9) Seven Hills Foundation							
81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	18,345				Program Operating
(10) S. Middlesex Opportunity Cncl							
300 Howard St. Framingham, MA	04-2389659	501(c)(3)	308				Donor Designated
(11) S. Middlesex Opportunity Cncl							
300 Howard St. Framingham, MA	04-2389659	501(c)(3)	100,000				Program Operating
(12)							
	(0),						

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

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

Cat. No 50055P

Schedule I (Form 990) (2012)

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No. 1545-0047 2012

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

United Way of Central Massachusetts, Inc.

Employer identification number 04-2104017

the selection criteria used to award the grants or assistance?	award the grants or	or assistance?	106?	ode in the United	States		· · · · · · · · · · · · · · · · · · ·
T E	ssistance to Go	vernments and	Organizations i	n the United St	its and Organizations in the United States. Complete if the organization more than \$5,000, Part II can be duplicated if additional space is needed.	the organization answoace is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV. line 21, for any recipient that received more than \$5,000, Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN		(d) Amount of cash grant	(e) Amount of non- cash assistance	(a) Amount of non- (book, FMV, appraisal, (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SHCAB Inc.	0077070 00	(2)(3)	86				CAE Grant
(2) The Bridge of Central MA	30-0707429	301(5)(3)	noce .				STATE OF THE STATE
4 Mann St. Worcester, MA 01602	04-2701581	501(c)(3)	748				Donor Designated
(3) The Bridge of Central MA							
4 Mann St, Worcester, MA 01602	04-2701581	501(c)(3)	45,000				Program Operated
(4) Trinity Lutheran Church							
73 Lancaster St. Worc. MA 01609	04-6066833	501(c)(3)	5,083				Donor Desg, 3rd Pty
(5) UMass Memorial - HOPE							
Coalition 26 Queen St. Worc. MA	04-2626179	501(c)(3)	260				Donor Desg, 3rd Pty
(6) UMass Memorial - HOPE					- ·-		
Coalition 26 Queen St. Worc. MA	04-2626179	501(c)(3)	70,000				Program Operating
(7) UW - North Central MA							
649 John Fitch Hwy, Fitchburg MA	04-2233021	501(c)(3)	2,771				Donor Designated
(8) UW - North Central MA							
49 John Fitch Hwy, Fitchburg MA	04-2233021	501(c)(3)	6,781				Donor Desg, 3rd Pty
(9) UW . Southbridge, Sturbridge,							
and Charlton Southbridge MA	04-2308155	501(c)(3)	4,070				Donor Designated
(10) UW · Southbridge, Sturbridge,							
and Charlton Southbridge MA	04-2308155	501(c)(3)	5,781				Donor Desg, 3rd Pty
(11) UW - Tri-County							
46 Park Street Framingham, MA	04-2104231	501(c)(3)	6,308				Donor Designated
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1 501(c)(3) and gov	ernment organiza	tions listed in the li	ne 1 table			
3 Enter total number of other organizations listed in the line 1 table	proanizations listed	In the line 1 table		•			A

Schedule I (Form 990) (2012)

Cat No 50055P

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

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

▶ Attach to Form 990.

Inited	United Way of Central Massachusetts Inc.	04-2104017	
Par	Part I General Information on Grants and Assistance		
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	sistance, and	
	the selection criteria used to award the grants or assistance?	· · · · · ·	% □
8	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		
Part	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	n answered "Yes" to F	orm 990,
	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.		

(i) Method of valuation (i) Description (ii) Amount of non- (ii) Method of valuation (ii) Description of the control of the co	(B) FIN	(c) IBC section	(d) Amount of cash	(a) Amount of non-	(f) Method of valuation	(a) Description of	(h) Purpose of grant
1 (a) Name and address of organization or government	(a)	ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) UW - Tri-County							
46 Park Street Framingham, MA	04-2104231	501(c)(3)	12,476				Donor Desg, 3rd Pty
(2) UW - Webster & Dudley							
PO Box 636 Webster, MA 01570	04-2380352	501(c)(3)	3,175				Donor Designated
(3) UW - Webster & Dudley							
PO Box 636 Webster, MA 01570	04-2380352	501(c)(3)	7,200				Donor Desg, 3rd Pty
(4) UW - Westport/GFR							
PO Box 2550 Fall River MA 02722	04-21040	501(c)(3)	2,000				Donor Desg, 3rd Pty
(5) Valley Residence for Improve							
176 Tacoma Street Worcester, MA	04-2702167	501(c)(3)	4,300				Minor Capital
(6) Valley Residence for Improve	i						
176 Tacoma Street Worcester, MA	04-2702167	501(c)(3)	38,000				Program Operating
(7) VNA Care Network, Inc.							
120 Thomas St. Worcester, MA	04-2947495	501(c)(3)	4,521				Donor Designated
(8) VNA Care Network, Inc.							
120 Thomas St. Worcester, MA	04-2947495	501(c)(3)	1,027				Donor Desg, 3rd Pty
(9) Webster Square Day Care Center			-				
1048 Main St. Worcester, MA	04-2449880	501(c)(3)	2,939				Donor Designated
(10) Webster Square Day Care Center							
1048 Main St. Worcester, MA	04-2449880	501(c)(3)	127				Donor Desg, 3rd Pty
(11) Webster Square Day Care Center							
1048 Main St. Worcester, MA	04-2449880	501(c)(3)	33,000				Program Operating
(12)							
2 Enter total number of section 501(c)(3) and government ord	1 501(c)(3) and gov	/ernment organiza	Janizations listed in the line 1 table	ine 1 table			9

Schedule I (Form 990) (2012)

Cat No 50055P

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

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

SCHEDULE 1 (Form 990)

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

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

OMB No 1545-0047

2012	Open to Public Inspection

		•					1	
Department of the Treasury				▶ Attach to Form 990.	Form 990.			Inspection
Name of the oxoganian							1	Employer identification number
ואמווס טו נוופ טופמווובמוטוו								
United Way of Central Massachusetts, Inc.	assachusetts,	Inc.						04-2104017
Part I General I	nformation	General Information on Grants and Assistar	Assistance					
1 Does the organization maintain records to substantiate	zation maınta	in records to subs		int of the grants or	assistance, the g	rantees' eligibility f	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ce, and
the selection crit	teria used to	the selection criteria used to award the grants or assistance?						· · · Ves
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	IV the organ	ization's procedur	es for monitoring t	the use of grant fu	nds in the United	States.		
Part Grants ar	nd Other As	sistance to Go	vernments and	Organizations	in the United St	ates. Complete	if the organization ans	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,
Part IV, lir	ne 21, for an	y recipient that r	received more th	nan \$5,000. Part	Il can be duplica	ated if additional	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	
1 (a) Name and address of organization	f organization	NIS (q)	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(e) Amount of non-		(h) Purpose of grant
or government	ıt		ıf applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) Worcester Roots Project	olect	:						
5 Pleasant Street 3rd FI, Worc MA	Worc MA	05-0566468	501(c)(3)	18,000				Program Operating

Donor Desg, 3rd Pty

Minor Capital

Donor Designated

CAF Grant

155,000

501(c)(3)

04-2382160

Council 484 Main St. Worcester, MA

(2) Worcester Community Action

5,183

501(c)(3)

04-2382160

Council 484 Main St. Worcester, MA (4) Worcester Community Action Council 484 Main St. Worcester, MA

(3) Worcester Community Action

4,128

501(c)(3)

04-2382160

Council 484 Main St. Worcester, MA (5) Worcester Community Action

(6) Worcester Community Action

1,196

501(c)(3)

04-2382160

35,000

501(c)(3)

04-2382160

Council 484 Main St. Worcester, MA

Program Operating

	20.120.1	(1)(1)	1111711		
(7) Worcester County Food Bank					
474 Boston Trnpke Shrewsbury, MA	04-3071457	501(c)(3)	115		CAF Grant
(8) Worcester County Food Bank			<u> </u>		
474 Boston Trnpke Shrewsbury, MA	04-3071457	501(c)(3)	11,937		Donor Designated
(9) Worcester County Food Bank					
474 Boston Trnpke Shrewsbury, MA	04-3071457	501(c)(3)	5,725		Donor Desg, 3rd Pty
(10) Worcester Education Dev Fndn					
Ste 224, 210 Park Ave, Worc. MA	56-2522670	501(c)(3)	28,000		Program Operating
(11) Worcester Youth Center					
326 Chandler St. Worc, MA 01602	04-3245867	501(c)(3)	2,775		Donor Designated
(12)					
2 Enter total number of section 501(c)(3) and government	501(c)(3) and gov	ernment organizat	organizations listed in the line 1 table	e 1 table	
3 Enter total number of other organizations listed in the line 1 table	rganizations listec	In the line 1 table			0

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

Cat No 50055P

Schedule I (Form 990) (2012)

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part I

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

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

2	Public
20	Open to

OMB No 1545-0047

Inspection

▶ Attach to Form 990.

Employer identification number 04-2104017 **%** □

√ Yes

.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and United Way of Central Massachusetts, Inc.

Part I General Information on Grants and Assistance

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II

the selection criteria used to award the grants or assistance?

Hart IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is fredeed. (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-libook, FMV, appraisal.	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal.	(g) Description of	(h) Purpose of grant
or government		ıf applıcable	grant		(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) Worcester Youth Center 326 Chandler St. Worc, MA 01602	04-3245867	501(c)(3)	52,500				Program Operating
(2) YMCA of Central MA							
766 Main St. Worcester, MA 01610 0	04-2105885	501(c)(3)	2,137				Donor Designated
(3) YMCA of Central MA							
IA 01610	04-2105885	501(c)(3)	5,328				Donor Desg, 3rd Pty
81 Plantation St. Worcester, MA	23-7112665	501(c)(3)	24,502				Donor Designated
81 Plantation St. Worcester, MA 2	23-7112665	501(c)(3)	1,059				Donor Desg, 3rd Pty
81 Plantation St. Worcester, MA 2	23-7112665	501(c)(3)	712,000				Program Operating
(7) YWCA of Central MA		,	-				
Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	14,061				Donor Designated
(8) YWCA of Central MA							
Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	2,083		•		Donor Desg, 3rd Pty
(9) YWCA of Central MA							
A 01608	04-2105873	501(c)(3)	4,543				Minor Capital
(10) YWCA of Central MA							
A 01608	04-2105873	501(c)(3)	258,876				Program Operating
(11) YWCA of Central MA							
I Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	3,000				Program Sponsorship

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

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

Cat No 50055P

Schedule I (Form 990) (2012)

SCHEDULE J (Form 990) .

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

United Way of Central Massachusetts, Inc. 04-2104017 Part I Questions Regarding Compensation Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ Housing allowance or residence for personal use ☐ First-class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees ☐ Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Written employment contract ☐ Compensation committee ☐ Independent compensation consultant ☐ Compensation survey or study ✓ Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe . If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990. Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	r each	n listed individual mu	st equal the total amo	unt of Form 990, Pa	rt VII, Section A, line	ia, applicable columi	n (U) and (E) amounts	s for that individual.
		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(F) Total of columns	i i
(A) Name and Title		(ı) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	(r) Compensation reported as deferred in prior Form 990
	0	125,860	0	0	O	18,534	144,394	
1 Timothy J. Garvin, Pres/CEO	≘							
	Ξ	101,615	0	0	0	6,217	107,832	
2 Jennifer Davis Carey, Exec Dir.	(ii)							
	(3)	84,490	0	0	0	15,489	99,979	
3 James L. Hayes, VP Finance/Ops	€							
	8							
4	€							
	8							
2	(E	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 4 4 1 1 4 4 1 1 4 4 1 1 4 4 1 1 1 4 4 1					
	8							
9	€		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	8							
7	3	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
	8							
8	(E)							
	(9)							
6	(ii)							
	3							
10	(E)							
	8							
11	E							
	(3)			_				
12	E							
	8			_				
13	(ii)							
	3							
14	(ii)							
	(3)							
15	€							
	8				_			
16	(E)							

Schedule J (Form 990) 2013

Satural Supplemental Information, avadination, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part Provide the information, avadination. The Executive Committee act as a Compensation Committee (ecommending any charges to the President/CEO salay, Any recommendations are subject to full Board of Directors. approved.
--

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
 Attach to Form 990 or Form 990-EZ. ► See separate instructions.
 Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Inspection

United	Way of Central Mass	achusetts, Inc.								04-2	21040	<u> 17</u>		
Par	Excess Benef	fit Transaction	ns (section 501 answered "Ye	(c)(3) a s" on l	and sect Form 99	on 501(c)(4 0, Part IV, I	4) org ine 25	anizations only). Sa or 25b, or For	m 99	D-EZ,	Part '	V, line	40b	
1	(a) Name of disqualified	person	(b) Relationship be	etween c	disqualified	person and		(c) Description	of tran	eaction	,		(d) Con	ected?
'	(a) Name of disquamed	person		organiza	ation			(c) Description	i Oi tiai	i3actioi	'		Yes	No
(1)														
(2)										_				
(3)														
(4)														
(5)														
(6)			·			<u>. </u>	L							
2	Enter the amount under section 4958				n manag 		qualıf	ied persons dui	rıng tl 	ne ye 	ar ► \$	<u> </u>		
3	Enter the amount o	f tax, if any, on	line 2, above,	reimb	ursed by	the organi	ızatıoı	ı	•	!	▶ \$			
Part	Complete if th	/or From Inter ne organization eported an ami	answered "Ye	s" on I	Form 99 art X, line	0-EZ, Part ' e 5, 6, or 22	V, line 2.	38a or Form 99	90, Pa	rt IV,	line 2	6; or ı	f the	
(a) N	arne of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	oan to or om the nization?	(e) Origir principal an		(f) Balance due	(g) In o	lefault?	by bo	proved pard or nittee?	(i) Wi agreei	
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)		1												
(9)														
(10)														
Total							. ▶	\$	}					
Part	Grants or As	sistance Bene ne organization	fiting Interest answered "Ye	ed Pe s" on	rsons. Form 99	0, Part IV, I	ıne 27	7.						
(a)	Name of interested person		ship between inter and the organization		(c) Amount	of assistance		(d) Type of assistanc	е	(е) Purpo	se of a	ssistan	ce
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi: revei	aring of zation's nues?
		 		Yes	No
(1) Frances Anthes	Board Member		Grants/Donor Designatio		1
(2) Karen Ludington	Board Member	\$66,130	Grants/Donor Designatio		1
(3)					
(4)					-
(5) (6)				+	
(7)				+	\vdash
(8)					
(9)					
(10)					
Part V Supplemental Information Provide additional information	on for responses to questions	on Schedule L (see	instructions).		
				•••••	
				-	
	·····				
		·			
		·	•		
			•••••		

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 Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Employer identification number

United Way of Central Massachusetts. Inc. 04-2104017 Community Services Program Volunteer Center - The United Way of Central Massachusetts supports a Volunteer Center internal to its operations. Since 1967, the of the Hands on Network and offers an array of services that build the capacity for effective volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral, placement services, recognition activities and participates in strategic initiatives that mobilize volunteers to meet local needs. The Center also manages Volunteer Solutions an on-line database of volunteer opportunities in central Massachusetts. The following list represents unique volunteer opportunities offered by the Center: Earned Income Tax Credit (EITC) Initiative - Through the EITC Initiative, UWCM is addressing Financial Stability by helping taxpayers claim federal rebates. We are part of the Worcester EITC Coalition, which is working to create awareness about the EITC and engage volunteers to help prepare taxes for free. The Coalition recruits volunteers to serve at VITA sites and helps people claim eligible tax credits. We are also working to build awareness about financial issues such as predatory lending practices, pay day loans, and predatory tax preparation services that further hinder an individual's ability to save and build assets. Day of Caring - The Volunteer Center at United Way of Central Massachusetts coordinates many events to promote voluntarism and leadership. In September 2012, we hosted our Annual Day of Caring, the largest one-day volunteer drive in the entire region, where over 1,300 people took to the streets of central Massachusetts to volunteer at dozens of locations for the day. Youth Venture Program - The Youth Venture Program (using the proven methods of Ashoka's Youth Venture) assembles teams of youth throughout Worcester who work to create goals and devise an action plan that results in the betterment of their community Youth Venture's motto is "Dream It, Do It, Grow It," offering young people the chance to create something good all on their own and execute plans to sustain their vision. Total investment in the Community Services program = \$147,078. Mass 2-1-1 - United Way of Central Massachusetts collaborates with other United Way's across the state, to fund the Mass 2-1-1 referral service to help with non-life threatening needs. 2-1-1 is an easy to remember telephone number that connects callers to information about health and human services available in their community. It serves as a resource for finding government benefits and services, non-profit organizations, support groups, volunteer opportunities, donation programs, and other local resources. Total investment = \$42,756 AFL-CIO Labor Community Services Program - The AFL-CIO Labor Community Services Program coordinates many programs to benefit

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017
Caring, organize the Handicapped Ramp Program, NALC food drive, the Holiday Toy Drive and other speci	al projects. One of the most
important roles of the Labor Community Services Program is to design and provide training sessions for u	nion members, their families
and other community partners. Volunteers from NALC Branch 12 delivered 348,000 pounds of food to org	anizations serving the hungry in
Central Massachusetts. Total investment = 119,865.	
Fiscal Sponsorships - The United Way of Central Massachusetts is serving as fiscal sponsor for the Invest	ing in Girls Alliance (IIGA) and
for the Worcester Education Collaborative (WEC). The IIGA provides research, education, advocacy, and p	rograms to address the needs
of middle-school girls in the Worcester area. The WEC is an independent advocacy organization working t	o ensure that students in the
Worcester Public Schools are given the opportunity to succeed at the highest possible level and to acquir	e the skills and knowledge to
master the challenges of the 21st century. The WEC is committed to supporting, facilitating, and developi	ng a wide variety of partnerships
among families, schools, organizations, and businesses that will both enhance the quality of public educat	tion in Worcester and the quality
of our common life. The IIGA had income of \$105,386 and expenses of \$49,838 included in United Way of (Central Massachusetts'
financial statements for this fiscal year. The WEC had income of \$161,884 and expenses of \$188,099(inclu	ding \$8,860 for
for management and general, and \$8,859 for fundraising) included in United Way of Central Massachusetts	' financial statements for this
fiscal year.	
Donor Designations - The United Way of Central Massachusetts facilitates the collection and distribution o	f donor designated pledges and
gifts to other 501(c)(3) nonprofit organizations. 382 agencies received donor designated contributions tot	aling \$786,702 in FY 2013.
Part VI - Section A - Line 9	
Bruce Gaultney, Worcester Telegram & Gazette, 100 Front Street, Worcester, MA 01608	
Michael J. Mulrain, Polar Beverages, 1001 Southbridge Street, Worcester, MA 01610	
Frances Anthes, Family Health Center of Worcester, 26 Queen Street, Worcester, MA 01610	
Edward M. Augustus, Jr., College of the Holy Cross, 1 College Street, P.O. Box GCR, Worcester, MA 01610	
Todd M. Bailey, Fallon Community Health Plan, 10 Chestnut Street, Worcester, MA 01608	
Reverend Louis G. Bond, Ph.D. 30 Cherry Lane, South Grafton, MA 01560	
Melinda J. Boone, Ed.D. Worcester Public Schools, 20 Irving Street, Worcester, MA 01609	
continued on additional Schedule O	

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number 04-2104017

United Way of Central Massachusetts, Inc.	04-2104017
Part VI - Section A - Line 9 (continued)	
Douglas Brown, UMass Memorial Health Care, Inc., 365 Plantation Street, Suite 300, Worcester, MA 016	05
Jack P. Calareso, Ph.D., Anna Maria College, 50 Sunset Lane Paxton, MA 01612	
Joseph P. Carlson, United Steel Workers of America – District 4 100 Medway Road, Ste. 403, Milford, M.	A 01751
James W. Coghlin, Jr. Coghlin Companies, Inc. 17 Briden Street, Worcester, MA 01605	
Glenda L. Daou, MA LMHC, Psychotherapy and Wellness Services, 15 Midstate Drive, Suite 206, Auburn	n, MA 01501
Joseph D. Freitas, The Hanover Insurance Group, Inc., 440 Lincoln Street, E10, Worcester, MA 01653	
Eve Gilmore, Edward Street Child Services, 34 Cedar Street, Worcester, MA 01609	
James Leary, University of Massachusetts Medical School, 55 Lake Avenue North, Worcester, MA 0165	5
Patsy C. Lewis, 72 Beaconsfield Road, Worcester, MA 01602	
Karen Ludington, Children's Friend, Inc., 21 Cedar Street, Worcester, MA 01609 Nadia McGourthy, Dresser & McGourthy, LLP, 50 Elm Street, Suite 4, Worcester, MA 01609	
Rep. James J. O'Day, State House - Room 42, Boston MA 02133	
Marcy Reed, National Grid, 40 Sylvan Road, Waltham, MA 02451	
Edwin Shea, Bank of America, 100 Front Street, MA6-231-20-04, Worcester, MA 01608	
Reverend Clyde Talley, Belmont A.M.E. Zion Church, 55 Illinios Street, Worcester, MA 01610	
Michael Tsostis, Benefit Development Group, 446 Main Street, Worcester, MA 01608	
Part VI - Section B - Line 11b: The Finance Committee received a draft version of the Form 990 and all	supporting schedules at its
October 28, 2013 meeting. The full Board of Directors received a copy of the final version of the Form 9	990 and all supporting schedules
to review in advance of its November 20, 2013 meeting. The document review was included as an agen	da item for that meeting.
Part VI - Section B - Line 12c - The Board of Directors annually sign a conflict of interest statement listi	
organizations that could potentially pose a conflict of interest. Board members abstain from voting on	issues or recommendations related
to those organizations.	

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017
Part VI - Section B - Line 15b - The Executive Committee conducts an annual performance review of the	CEO and recommends any
compensation adjustments to the full Board of Directors. Compensation for the Vice President of Financial	ce and Operations
is determined by the CEO. All compensation is included in the organization's budget which is reviewed	by the Finance Committee
and approved by the full Board of Directors.	
Part VI - Section C - Line 19 - United Way of Central Massachusetts posts its annual audited financial sta	tements and its Form 990 and all
supporting schedules on its web site. The documents are also available for public review at the organization	ation's office. The conflict
of interest statements are not made available directly to the public, but minutes from all board meetings	including all votes taken are
available to the public at the United Way of Central Massachusetts office.	
	•••••
Part XI - Question 5 - Other changes in net assets of fund balances - United Way of Central Massachuset	ts has two funds established at the
Greater Worcester Community Foundation. The change in values of these funds is listed as a separate I	ine item in the
Statement of Activities in the audited financial statements. This change for FY 2013 was \$99,726.	
United Way of Central Massachusetts estimates its uncollectible expense on its present year campaign I	pased on historical data.
Per IRS requirements, the variance of actual collections from prior campaign year uncollectible estimate	s should be included on this line.
The adjustment for collections from prior year campaigns included in the FY 2013 audited financial state	ments was \$172,857
Total Other changes in net assets of fund balances = \$272,583.	
Continuation of Schedule I - Part IV - Donor Designations - Organizations receiving donor designations	have been screened to verify
501(c)(3) status and PATRIOT Act compliance.	
Minor Capital Grants - Minor capital grants were also awarded by a competitive process based on need.	Receipts of final

Minor Capital Grants - Minor capital grants were also awarded by a competitive process based on need. Receipts of final

purchases are required as documentation. The grants are approved by the full Board of Directors.

Schedule I Codes and Definitions (column h):

CSF Grant - Community Support Fund (CSF) grants are made to agencies providing basic needs (food, fuel assistance, etc.)

Donor Designated - An unrestricted grant made to an agency at the direction of the donor(s) in support of its general operating costs.

Donor Desg, 3rd Pty - An unrestricted grant made to an agency, at the direction of the donor(s), collected and paid directly to the agency by a 3rd party, in support of its general operating costs.

(continued on subsequent Schedule O)

SCHEDULE O (Form 990 gr 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer identification number

United Way of Central Massachusetts, Inc.	04-2104017
Schedule I Codes and Definitions (column h): (continued from previous Schedule O)	
General Operating - An unrestricted grant made to an agency in support of its general operating cost	s.
IIGA Grant - A restricted grant made to fund an agency program from the Investing in Girls Alliance.	
Minor Capital - Grants awarded for purchases of minor capital items.	
Program Operating - A restricted grant made to an agency in support of the costs associated with a sp	pecific program that it operates.
Program Spnsrshp - Sponsorship of an agency event.	
Overhead Calculation	
The standard formula for calculating the overhead ratio among United Ways is as follows:	
Core Form, Part IX, line 25, Column C (M&G Exp.) + Column D (Fundraising Exp.) divided by	
Core Form, Part VIII, Line 12, Column A (Total Revenue)	
For United Way of Central Massachusetts this calculation is as follows: (523,350 + 914,842) / 6,816,108	3 = 21.1%
The actual management/general (m & g) and fundraising expenses increased by \$34,177 from the prev	
include \$17,719 of m & g and fundraising expenses for the Worcester Education Collaborative (WEC).	
for the WEC.	
Annually, UWCM subsidizes its m & g and fundraising expenses through distributions from its investo	nents and the UWCM Fund
held at the Greater Worcester Community Foundation. The total subsidy for FY 2013 was \$255,579. Ti	
over 82% of its current year revenue into program services. This subsidy is not included in the overh	

United Way of Central Massachusetts, Inc.

Financial Statements as of and for the Years Ended June 30, 2013 and 2012 and Independent Auditors' Report

TABLE OF CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS AS OF AND FOR THE YEARS ENDED JUNE 30, 2013 and 2012:	
Statements of Financial Position	2
Statements of Activities	3 - 4
Statements of Functional Expenses	5 - 6
Statements of Cash Flows	7
Notes to Financial Statements	8 - 19



INDEPENDENT AUDITORS' REPORT

To the Board of Directors of United Way of Central Massachusetts, Inc. Worcester, Massachusetts

We have audited the accompanying financial statements of the United Way of Central Massachusetts, Inc. (the Organization; a non-profit organization), which comprise the statements of financial postion as of June 30, 2013 and 2012, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the United Way of Central Massachusetts, Inc. as of June 30, 2013 and 2012, and the changes in its net assets, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

September 25, 2013

STATEMENTS OF FINANCIAL POSITION JUNE 30, 2013 AND 2012

		2013		2012
ASSETS				
Cash and cash equivalents	\$	1,498,037	\$	1,265,387
Pledges receivable, net		2,189,141		2,318,244
Accounts receivable and other assets		105,908		111,501
Investments		4,818,545		4,316,618
Beneficial interest in trust (Note 14)		1,125,022		1,057,672
Property and equipment, net		61,356		74,258
Total Assets	\$	9,798,009	<u>\$</u>	9,143,680
LIABILITIES AND NET ASSETS				
Accounts payable	\$	14,700	\$	16,043
Accrued expenses		116,417		124,801
Community impact grants payable (Note 15)		3,567,719		3,576,721
Women's initiative grants payable		304,208		300,765
Designations payable		333,654		357,788
Total Liabilities		4,336,698		4,376,118
Net Assets:				
Unrestricted		4,455,054		3,937,853
Temporarily restricted		527,649		511,700
Permanently restricted		478,608		318,009
Total Net Assets		5,461,311		4,767,562
Total Liabilities and Net Assets	<u>\$</u>	9,798,009	\$	9,143,680

See notes to financial statements.

STATEMENT OF ACTIVITIES
YEAR ENDED JUNE 30, 2013

	U	nrestricted		mporarily estricted	manently estricted		Total
Support and Revenue:							
Campaign Revenue	\$	5,365,137	\$	673,293	\$ -	\$	6,038,430
Less:							
Designations		(786,702)		-	-		(786,702)
Administrative fees		(19,543)		-	-		(19,543)
Allowance for uncollectible pledges (Note 3)		(5,016)		-	-		(5,016)
Net assets released from restrictions		686,449		(686,449)	 		
Net Campaign Revenue		5,240,325		(13,156)	-		5,227,169
Investment income (net of expenses)		45,497		-	-		45,497
Gain on sale of investments		237,100		-	-		237,100
Unrealized gain on investments		181,912		-	-		181,912
Interest income		14,683		-	-		14,683
Change in beneficial interest in trust (Note 14)		75,866		23,860	-		99,726
Donor designation fees		32,106		-	-		32,106
Grant and sponsorship income (Note 17)		116,879		366,770	160,599		644,248
Rental loss (net of expense) (Note 11)		(53,597)		-	-		(53,597)
Net assets released from restrictions		361,525		(361,525)	 		
Total Support and Revenue		6,252,296		15,949	 160,599		6,428,844
Expenses:							
Community Impact Grants (Note 15)		2,828,354			 		2,828,354
Women's Initiative Grants (Note 15)		316,208			 		316,208
Other Grants/Sponsorships		283,672		<u> </u>	 		283,672
Program Services:							
Community Services		147,078		-	-		147,078
Mass 211		42,756		-	-		42,756
Labor Community Services		119,865		-	-		119,865
Community Impact		337,257		-	-		337,257
Women's Initiative Community Impact		56,369		-	-		56,369
Other Programs		220,218		<u> </u>	 		220,218
Total Program Services		923,543			 		923,543
Supporting Services		1,383,318			 		1,383,318
Total Expenses		5,735,095		-	 		5,735,095
ncrease in Net Assets		517,201		15,949	 160,599		693,749
Net Assets - beginning		3,937,853		511,700	 318,009		4,767,562
Net Assets - ending	\$	4,455,054	\$	527,649	\$ 478,608	\$	5,461,311
And I woulder . And the	<u>*</u>	.,,	<u> </u>	,0.5	 ,000	<u> </u>	

See notes to financial statements.

STATEMENT OF ACTIVITIES YEAR ENDED JUNE 30, 2012

	Un	restricted		mporarily estricted	manently stricted	Total
Support and Revenue:						
Campaign Revenue	\$	5,291,499	\$	722,313	\$ -	\$ 6,013,812
Less:						
Designations		(846,219)		-	-	(846,219)
Administrative fees		(30,133)		-	-	(30,133)
Allowance for uncollectible pledges (Note 3)		(155,823)		-	-	(155,823)
Net assets released from restrictions		638,260		(638,260)	 	
Net Campaign Revenue		4,897,584		84,053	_	4,981,637
Investment income (net of expenses)		25,774		-	-	25,774
Gain on sale of investments		143,798		-	-	143,798
Unrealized loss on investments		(353,018)		-	-	(353,018)
Interest income		26,301		-	-	26,301
Change in beneficial interest in trust (Note 14)		(24,174)		(5,706)	-	(29,880)
Donor designation fees	,	56,905		-	-	56,905
Grant and sponsorship income (Note 17)		73,898		632,201	6,484	712,583
Rental loss (net of expense) (Note 11)		(54,690)		-	-	(54,690)
Net assets released from restrictions		658,491		(658,491)	 -	
Total Support and Revenue		5,450,869	_	52,057	 6,484	 5,509,410
Expenses:						
Community Impact Grants (Note 15)		2,762,000			 	 2,762,000
Women's Initiative Grants (Note 15)		315,765			 	315,765
Other Grants/Sponsorships		285,847		-		 285,847
Program Services:						
Community services		120,067		-	-	120,067
Mass 211		52,687		-	-	52,687
Labor Community Services		119,544		-	-	119,544
Community Impact		453,295		-	-	453,295
Women's Initiative Community Impact		49,915		-	-	49,915
Main South Promise Neighborhood Partnership		217,951		-	-	217,951
Other programs		281,041			 	 281,041
Total Program Services		1,294,500			 	 1,294,500
Supporting Services		1,349,141			 	 1,349,141
Total Expenses		6,007,253			 	 6,007,253
Decrease) Increase in Net Assets		(556,384)		52,057	 6,484	 (497,843)
Net Assets - beginning		4,494,237		459,643	311,525	5,265,405
Net Assets - ending	\$	3,937,853	\$	511,700	\$ 318,009	\$ 4,767,562

See notes to financial statements.

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2013

Community Comm				PRO	PROGRAM SERVICES	VICES							
Community Community Community Programs Program Admin. Surjoin Su						Women's	:						
Community Community Community Community Programs Program Admin. Admin. Survices Africa Admin. Survices Africa Admin.				Labor		Initiative	Other	Total				Total	
Sorvices Resp. 271 Services Refinance Trigon 178,258 5 44004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 11,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 14,004 \$ 780,598 \$ 11,004 \$ 1,004		Community		Community	Community	Community		Program	Admin.			Support	
section section <t< th=""><th></th><th></th><th>Mass 211</th><th>Services</th><th>Impact</th><th>Impact</th><th></th><th>Services</th><th>& Finance</th><th>Marketing</th><th>Fundralsing</th><th>Services</th><th>Total</th></t<>			Mass 211	Services	Impact	Impact		Services	& Finance	Marketing	Fundralsing	Services	Total
her fringe benefits 9334 - 4,904 12,324 1,721 7,486 30,629 18,789 5,589 30,106 5,464 1 1,224 1,724 1,724 1,748 11,830 45,683 14,791 81,380 142,444 2 1,244 2 1	Salaries and related expenses:								\$ 270,610				\$ 1,213,237
the fininge benefits	Darmall forms		· ·						18,769				85,093
ties and related expusses 77,460 85,930 266,999 33,483 115,314 579,146 335,062 96,316 546,090 977,468 1.5 fees and contract services 12,172 42,756 5.04 26,766 4.20 74,286 156,854 79,477 1,876 67,992 149,345 3.5 fees and contract services 87	Health and other fringe benefits	9,534		13,696	76,387	5,095	11,118	115,830	45,683	14,791	81,980	142,454	258,284
Continuous contracts services 12,122 42,756 504 26,766 420 74,286 156,854 79,477 1,876 67,992 149,345 3,575 1,575	Total salaries and related expenses	77,460	1	85,930	266,959	33,483	115,314	579,146	335,062	96,316	546,090	977,468	1,556,614
Control services 12,122 42,756 504 26,766 420 74,286 156,854 79,477 1,876 67,992 149,345 3575	Other expenses:												
1,525 1,52	Professional fees and contract services	12,122	42,756	504	26,766	420	74,286	156,854	79,477	1,876	67,992	149,345	306,199
807 - 21,717 505 158 2,954 26,141 4,649 333 2,303 7,285 11,122 2,586 630 313 7,059 3,413 1,207 4,868 9,488 1,152	Directors and officers insurance			•	•	٠	,	•	3,575	•	•	3,575	3,575
2,775 - 250 314 44 258 2,391 1,207 4,886 9,488 1,122 1,122 1,122 1,123 1,124 1,125 1,124 1,125 1,124 1,125 1,128 1	Supplies	807	•	21,717	505	158	2,954	26,141	4,649	333	2,303	7,285	33,426
1,525 1,526 2.50 314 44 2.58 2,391 2,192 109 4,821 7,122 104 17,128 17,128 17,128 17,128 17,128 17,268 17,268 17,268 17,268 17,268 17,268 17,269 17,269 17,279	Telephone	2,775	•	755	2,586	630	313	7,059	3,413	1,207	4,868	9,488	16,547
17268	Postage	1,525	٠	250	314	4	258	2,391	2,192	109	4,821	7,122	9,513
and publicity 4,240 4,740 4,740 729 156 1,390 6,962 1,951 3,884 26,267 32,102 d events 14,635 - - - - - 1,2697 22,097 49,429 402 14,415 35,443 50,260 rockasional development 573 - 1,086 11,374 1,125 2,284 16,742 9,155 1,532 12,130 22,817 rockasional development 570 -	Occupancy	17,268	٠	4,849	16,604	4,044	•	42,765	22,329	7,623	31,150	61,102	103,867
devenis 14,655	Promotion and publicity	4,240	•	447	729	156	1,390	6,962	1,951	3,884	26,267	32,102	39,064
rofessional development 573 - 1,086 11,374 1,125 2,584 16,742 9,155 1,532 12,130 22,817 and subscriptions 2,237 - 628 4,352 524 - 7,741 6,649 988 5,510 13,147 1,119 1,119 2,676 2,180 377 119 2,676 2,180 377 119 2,676 2,180 377 119 2,676 2,180 377 119 2,676 2,180 377 119 2,676 2,180 37,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 2,141 6,649 988 5,510 13,147 6,141 6,1	Programs and events	14,635		٠	•	12,697	22,097	49,429	402	14,415	35,443	50,260	689'66
250 -	Travel and professional development	573	•	1,086	11,374	1,125	2,584	16,742	9,155	1,532	12,130	22,817	39,559
errati and maintenance 2,237	Organization dues and subscriptions	250	•	•	•	•	710	960	2,180	377	119	2,676	3,636
cr expenses 56,432 42,756 30,236 63,230 19,798 104,638 317,090 136,299 32,344 190,917 359,560 641 before depreciation 133,892 42,756 116,166 330,189 53,281 219,952 896,236 471,361 128,660 737,007 1,337,028 2,22 ate dues 2,790	Equipment rental and maintenance	2,237	•	628	4,352	524	٠	7,741	6,649	886	5,510	13,147	20,888
er expenses 56,432 42,756 30,236 63,230 19,798 104,638 317,090 136,299 32,344 190,917 359,560 6 before depreciation 133,892 42,756 116,166 330,189 53,281 219,952 896,236 471,361 128,660 737,007 1,337,028 2,22 aite dues 2,790 - 780 1,495 653 266 5,984 3,538 1,231 5,689 18,753 36,471 site dues 10,396 - 2,919 5,573 2,435 - 21,323 13,129 4,589 18,753 36,471 s 147,078 \$ 42,756 \$ 119,865 \$ 337,257 \$ 56,369 \$ 220,218 \$ 923,543 \$ 488,028 \$ 134,480 \$ 16,810 \$ 1,383,318 \$ 2.23	Miscellaneous		.		•		46	46	327	•	314	641	289
Defore depreciation 133,892 42,756 116,166 330,189 53,281 219,952 896,236 471,361 128,660 737,007 1,337,028 2,23 and state dues 2,790 - 780 1,495 653 266 5,984 3,538 1,231 5,050 9,819 aft dues 10,396 - 2,919 5,573 2,435 - 21,323 13,129 4,589 18,753 36,471 8 147,078 \$ 42,756 \$ 119,865 \$ 337,257 \$ 56,369 \$ 220,218 \$ 923,543 \$ 488,028 \$ 134,480 \$ 760,810 \$ 1,383,318 \$ 22,730	Total other expenses	56,432	42,756	1	63,230	19,798	1	317,090	136,299	32,344	190,917	359,560	676,650
2,790 - 780 1,495 653 266 5,984 3,538 1,231 5,050 9,819 atc dues 10,396 - 2,919 5,573 2,435 - 21,323 13,129 4,589 18,753 36,471 \$ 147,078 \$ 42,756 \$ 119,865 \$ 337,257 \$ 56,369 \$ 220,218 \$ 923,543 \$ 488,028 \$ 134,480 \$ 760,810 \$ 1,383,318 \$ 22,520,218	Total expenses before depreciation and national and state dues	133,892	42,756					896,236	471,361	128,660		1,337,028	2,233,264
atic dues 10,396 - 2,919 5,573 2,435 - 21,323 13,129 4,589 18,753 36,471 5 147,078 5 42,756 5 119,865 5 337,257 5 56,369 5 220,218 5 923,543 5 488,028 5 134,480 5 760,810 5 1,383,318 5 2,3	Denreciation	2,790	,	780	1,495	623		5,984	3,538	1,231	5,050	9,819	15,803
\$ 147,078 \$ 42,756 \$ 119,865 \$ 337,257 \$ 56,369 \$ 220,218 \$ 923,543 \$ 488,028 \$ 134,480 \$ 760,810 \$ 1,383,318	National and state dues	10,396		2,919	5,573	2,435	,	21,323	13,129	4,589	İ	36,471	57,794
	Total expenses	\$ 147,078		6					\$ 488,028		S	\$ 1,383,318	\$ 2,306,861
	•					i							

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

 $\begin{bmatrix} 1 \end{bmatrix}$

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2012

ERVICES
PROGRAM SI

				2002	UNI SEIVAISES	2							
					Women's	Main South							
			Labor		Initiative	Promise	Other	Total				Total	
	Community		Community	Community Community	Community	Neighborhood	Programs	Program	Admin.			Support	
	Services Mass 211	Mass 211	Services	Impact	Impact	Partnership	(Note 17)	Services	& Finance	& Finance Marketing Fundraising	undraising	Services	Total
Salaries and related expenses:		•	•		27.00	01 233	3 110 468	3C9 908 3	260 036	.01010	306 704	740 056	¢ 1 346 587
Salaries	\$ 57,737		\$ 60,524	971,807		700,10	•		+60,602 4	017,40	230,04		700,040,1
Payroll taxes	3,726	•	4,830	17,165	1,409	6,959	8,569	42,658	18,644	6,038	26,706	51,388	94,046
Health and other fringe benefits	12,846		16,197	75,469	5,732	17,282	6,725	134,251	62,378	23,308	92,479	178,165	312,416
Total salarres and related expenses	74,309		87,551	350,762	29,288	105,873	125,752	773,535	350,056	113,564	515,889	979,509	1,753,044
Other expenses:													
Professional fees and contract services	10,253	52,687	306	28,535	161	111,163	106,644	310,379	59,742	11,720	54,215	125,677	436,056
Internal program grants and sponsorships	•	•	•	•	•	•	1,000	1,000	•	•	•	•	1,000
Directors and officers insurance	•	•	•	•	•	,	•	•	3,344			3,344	3,344
Supplies	481	•	17,899	487	29	418	3,597	22,949	4,869	482	1,432	6,783	29,732
Telephone	1,145	•	926	4,335	607		110	7,173	4,105	1,701	6,652	12,458	169'61
Postage	2,090	٠	482	479	99	80	453	3,578	2,603	386	4,245	7,234	10,812
Occupancy	5,467	٠	5,190	23,069	3,229	•	•	36,955	21,838	9,048	35,356	66,242	103,197
Promotion and publicity	4,353	•	1,151	1,198	44	•	10,342	17,488	1,228	4,466	17,597	23,291	40,779
Programs and events	14,274	•	•	1,005	12,321	168	25,098	52,866	•	15,737	21,397	37,134	000'06
Travel and professional development	1,922	•	1,200	22,873	189	321	6,459	32,964	7,608	203	6,416	14,527	47,491
Organization dues and subscriptions	272	•	•	S	•	•	1,320	1,597	2,307	336	147	2,790	4,387
Equipment rental and maintenance	775	٠	735	5,467	457	•	•	7,434	7,586	1,282	7,196	16,064	23,498
Miscellaneous	16			.	•	•		91	651	33		684	700
Total other expenses	41,048	52,687	27,939	87,453	18,171	112,078	155,023	494,399	115,881	45,694	154,653	316,228	810,627
Total expenses before depreciation and national and state dues	115,357	52,687	115,490	438,215	47,459	217,951	280,775	1,267,934	465,937	159,258	670,542	1,295,737	2,563,671
Denreciation	1.104			3,059	653	•	266	6,131	4,423	1,829	7,162	13,414	19,545
National and state dues	3.606		3,005	12,021	1,803		•	20,435	18,032	7,212	14,746	39,990	60,425
											t		
Total expenses	\$ 120,067	\$ 52,687	\$ 119,544	\$ 453,295	\$ 49,915	\$ 217,951	\$ 281,041	\$ 1,294,500	\$ 488,392	\$ 168,299	\$ 692,450	\$ 1,349,141	\$ 2,643,641
See notes to financial statements													

STATEMENTS OF CASH FLOWS YEARS ENDED JUNE 30, 2013 AND 2012

	2013	}	2012
CASH FLOWS FROM OPERATING ACTIVITIES:			
Increase (decrease) in net assets	\$ 693	,749	\$ (497,843)
Adjustments to reconcile change in net assets to net cash			
provided by (used in) operating activities:			
Depreciation	15	,803	19,545
Allowance for uncollectible pledges	(84	,945)	73,037
Realized and unrealized net (gain) loss on investments	(419	,012)	209,220
Changes in operating assets and liabilities:			
Pledges receivable	214	,048	(33,945)
Accounts receivable and other assets	5	,593	96,369
Accounts payable	(1	,343)	(60,805)
Accrued expenses	(8	,384)	(20,502)
Community impact grants payable	(9	,002)	(356,316)
Women's initiative grants payable	3	,443	47,863
Designations payable	(24	,134)	41,632
Net cash provided by (used in) operating activities	385	<u>,816</u>	(481,745)
CASH FLOWS FROM INVESTING ACTIVITIES:			
Acquisition of property and equipment	(2	,901)	(1,405)
Acquisition of investments	(2,788	,758)	(2,470,809)
Proceeds from sale of investments	2,705	,843	2,658,876
Change in beneficial interest trust	(67	,350)	46,627
Net cash (used in) provided by investing activities	(153	,166)	233,289
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	232	,650	(248,456)
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	1,265	,387	1,513,843
CASH AND CASH EQUIVALENTS, END OF YEAR	<u>\$ 1,498</u>	037 \$	5 1,265,387

NOTES TO FINANCIAL STATEMENTS YEARS ENDED JUNE 30, 2013 AND 2012

1. ORGANIZATION

United Way of Central Massachusetts (the "Organization") is a not-for-profit organization striving for excellence in meeting the human service needs of the community through the development and effective distribution of resources.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation - The Organization reports information regarding its financial position and activities according to three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Cash and Cash Equivalents - The Organization considers all highly liquid debt instruments purchased with maturities of three months or less to be cash equivalents. The Organization places its cash and cash equivalents with various financial institutions. At times such investments may be in excess of Federal Deposit Insurance Corporation (FDIC) insurance limits. However, the Organization has not experienced any losses in such accounts. The Organization believes it is not exposed to any significant credit risk on cash and cash equivalents as the funds are held in accredited financial institutions.

Investments - Investments in equity and debt securities are reported at fair value using quoted market prices. Investment securities are exposed to various risks including, but not limited to, interest rate and market and credit risks. Due to the level of risks associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. The Organization seeks to minimize market risk by diversifying its investment portfolio. The Organization has adopted a spending policy of 5% of the average market value of the investments over the preceding twenty quarters.

Gains or losses on investments are reported in the statements of activities as increases or decreases in unrestricted net assets unless their use is temporarily restricted by explicit donor stipulations or by law.

Property and Equipment - Property and equipment are stated at cost or, if donated, at the approximate fair market value at the date of donation. The Organization follows the practice of capitalizing all expenditures for property and equipment in excess of \$1,000. Depreciation is provided on a straight-line basis over the following estimated useful lives:

	<u>YEARS</u>
Building and improvements	15 - 25
Equipment	3 – 5
Furniture and fixtures	10

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Contributions - Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Time restricted contributions are reported as temporarily restricted support and reclassified to unrestricted net assets upon expiration of the time restriction.

Donors may designate their gifts to specific United Way affiliated and non-affiliated agencies. Non-affiliated agencies are required to provide the Organization with documentation of their tax-exempt status. Donor designations to specific agencies are not included in net campaign revenues and support or allocations to participating agencies in the accompanying Statements of Activities.

A substantial number of volunteers and corporations have donated significant time and services for which no amounts have been reflected in the financial statements. The Organization reflects only amounts for services that create or enhance non-financial assets, or that require specialized skills and are provided by individuals possessing those skills. No such services were donated during 2013 and 2012.

Designations - Agency-specific designations as specified by the donor are recorded upon receipt of the contribution and are reflected as an offset to recorded campaign revenue in the Statement of Activities and, until distributed to the agency, as a liability in the Statement of Financial Position.

Donated Assets - Donated marketable securities and other non-cash donations are recorded as contributions at their estimated fair value at the date of the donation.

Advertising - Advertising costs are charged to operations as incurred. These costs were approximately \$7,700 and \$4,200 in 2013 and 2012, respectively.

Income Tax Status - The Organization is exempt from Federal income taxes as an organization (not a private foundation) formed for charitable purposes under Section 501(c)(3) of the Internal Revenue Code. The Organization is also exempt from state income taxes. Donors may deduct contributions made to the Organization within the Internal Revenue Code requirements.

Income tax benefits are recognized for income tax positions taken or expected to be taken in a tax return, only when it is determined that the income tax position will more-likely-than-not be sustained upon examination by taxing authorities. The Organization believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse affect on the Organization's financial condition, reported activity, or cash flows. The Organization is subject to audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Organization believes it is no longer subject to income tax examinations for years prior to 2009.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates. The Organization's most significant estimate is the allowance for uncollectible pledges.

Reclassification - Certain amounts in the June 30, 2012 financial statements have been reclassified to conform to the June 30, 2013 presentation.

Subsequent Events - Management has evaluated all subsequent events through September 25, 2013, the date the financial statements were available to be issued.

3. PLEDGES RECEIVABLE

Pledges receivable consists of the following at June 30:

	2013		2012
Campaign in 2012	\$ 2,189,141	\$	-
Campaign in 2011	-		2,268,360
Campaign in 2010	<u>-</u>	٠	49,884
	\$ 2,189,141	\$	2,318,244
	\$ 2,189,141	<u>\$</u> _	2,318,2

Pledges receivable are presented net of an allowance for uncollectible pledges of \$335,836 and \$420,781 in 2013 and 2012, respectively.

During 2013, the Organization received approximately \$60,500 in campaign pledge payments from prior years. Since the Organization's policy is to write off all uncollected pledges the following fiscal year, these pledges had been written off to the allowance for uncollectible pledges in prior years. Therefore, the Organization recorded the receipt of these unexpected pledge collections against the allowance for uncollectible pledges in 2013.

4. INVESTMENTS

Investments are stated at fair value and consist principally of equity and debt securities. Fair values and unrealized appreciation at June 30, are summarized as follows:

		2013	
	Cost	Fair Value	Unrealized Appreciation
Equity Mutual funds Limited partnership	\$ 2,305,300 1,637,656 180,000 \$ 4,122,956	\$ 2,957,532 1,681,013 180,000 \$ 4,818,545	\$ 652,232 43,357 - \$ 695,589
	Cost	2012 Fair Value	Unrealized Appreciation
Equity Mutual funds	\$ 2,162,346 1,650,760 \$ 3,813,106	\$ 2,599,983 1,716,635 \$ 4,316,618	\$ 437,637 65,875 \$ 503,512

The Organization recorded net gains of \$237,100 and \$143,798 from the sale of investments during 2013 and 2012, respectively. The Organization incurred investment custodial and advisory fees of \$35,546 and \$34,244 during 2013 and 2012, respectively.

5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

	2013	2012
Building and Improvements	\$ 1,141,425	\$ 1,141,425
Equipment	433,662	430,761
Furniture and Fixtures	204,916	204,916
	1,780,003	1,777,102
Accumulated Depreciation	(1,718,647)	(1,702,844)
	\$ 61,356	\$ 74,258
	Ψ 01,550	Ψ 17,230

Depreciation expense was \$15,803 and \$19,545 in 2013 and 2012, respectively.

6. LINE OF CREDIT

The Organization maintains a line of credit agreement with an available borrowing limit of \$1,000,000. The line of credit bears interest at the British Bankers Association LIBOR Rate ("BBA LIBOR") plus 3.75% (3.94% at June 30, 2013). The line of credit expires in January 2014. There were no outstanding borrowings as of June 30, 2013 and 2012.

7. TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets at June 30 are restricted for the following purposes:

	2013		2012
Future campaign revenue	\$ 3,520	\$	28,110
Women's Initiative	77,499		91,077
Appreciation on WI Fund	29,603		15,743
Small capital grant awards	50,003		53,160
Investing in Girls Alliance (Note 17)	117,852		62,304
Worcester Education Collaborative (Note 17)	132,980		159,195
Ramp program	116,192		94,523
Other	 <u>-</u>		7,588
	\$ 527,649	<u>\$</u>	511,700

8. PERMANENTLY RESTRICTED NET ASSETS

Permanently net assets were restricted for the following purposes as of June 30:

	2013	2012
UWCM endowment fund	\$ 60,000	\$ 60,000
Women's Initiative endowment fund	238,608	258,009
Cutler endowment fund	 180,000	 <u>-</u>
	\$ 478,608	\$ 318,009

The income on the endowment funds may be expendable to support activities of the Organization.

9. NET ASSETS RELEASED FROM RESTRICTIONS

Temporarily restricted net assets were released for the following purposes:

	2013		2012
Future campaign revenue	\$ 28,110	\$	20,400
Women's Initiative	542,422		518,054
Small capital grant awards	53,157		50,520
Investing in Girls Alliance	49,838		77,371
Worcester Education Collaborative	188,099		218,104
Main South Promise Neighborhood Partnership	16,500		283,782
Programs and events	 169,848		128,520
	\$ 1,047,974	\$_	1,296,751

10. GROSS CAMPAIGN REVENUE

Gross campaign revenue by campaign year (October 1 – September 30) consists of the following:

	paign)13	С	ampaign 2012	С	ampaign 2011
June 30, 2013	\$ 3,520	\$	5,904,479	\$	130,431
June 30, 2012	-		28,110		5,924,286
June 30, 2011	 		-	_	20,400
	\$ 3,520	\$	5,932,589	\$	6,075,117

11. RENTAL INCOME

The Organization owns office condominium space. The Organization did not receive any rental payments from this office space during 2013 and 2012. However, the Organization paid condominium fees and other rental expenses of \$53,597 and \$54,690 during 2013 and 2012, respectively.

The carrying value of the property held for lease was as follows:

		2013	2012
Building and Improvements Less: Accumulated Depreciation	\$	191,095 (190,257)	\$ 191,095 (190,048)
	<u>\$</u>	838	\$ 1,047

12. LEASE COMMITMENTS

The Organization leased office equipment under three operating lease agreements starting in July and August 2012 which require a combined monthly payment of \$915. Two of the leases expire in July 2015 and the remaining lease expires December 2017. Future minimum lease payments under the operating leases for office equipment at June 30, 2013 are as follows:

	<u> </u>	<u>mount</u>
2014	\$	10,982
2015		10,982
2016		2,280
2017		2,280
2018		380
Total minimum lease payments	\$	26,904

Total expense under the office equipment leases amounted to \$11,144 and \$8,681 in 2013 and 2012, respectively.

16. FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value, maximizes the use of observable inputs, and minimizes the use of unobservable inputs by requiring that the observable inputs be used when available. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are as follows:

- Level 1: Valuation based on quoted prices in active markets for identical assets or liabilities that a reporting entity has the ability to access at the measurement date, and where transactions occur with sufficient frequency and volume to provide pricing information on an ongoing basis.
- Level 2: Valuation based on inputs other than quoted market prices included within Level 1 that are observable for the asset or liability, either directly or indirectly. Inputs include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets, or liabilities in markets that are not active, that is, markets in which there are few transactions, prices are not current, or prices vary substantially over time.
- Level 3: Valuation based on inputs that are unobservable for an asset or liability and should be used to measure fair value to the extent that observable inputs are not available, thereby allowing for situations in which there is little, if any, market activity for the asset or liability at the measurement date. This input, therefore, reflects the entity's assumptions about what market participants would use in pricing the asset or liability developed based on the best information available in the circumstances.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2013 and 2012.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Organization are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Organization are deemed to be actively traded.

Equity securities: Valued at the closing price reported on the active market on which the individual securities are traded.

Limited partnership: Represents the Organization's ownership interest in an investment limited partnership. Valued at the net asset value of the Organization's membership interest in the partnership capital as reported by the limited partnership.

16. FAIR VALUE MEASUREMENTS (CONTINUED)

Beneficial interest in trusts: Consist of beneficial interest in the UWCM Fund and in the Women's Initiative Fund in Honor of Lois B. Green. The fair value of these funds (and its underlying assets) is based on independent reports obtained from Greater Worcester Community Foundation (GWCF), an independent party.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Organization believes its valuation methods are appropriate and consistent, the use of different methodologies or assumptions could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, he Organizations assets at fair value at June 30:

	2013							
		Level 1		Level 2		Level 3		<u>Total</u>
Mutual funds:								
Short-term bond	\$	1,681,013	\$	-	\$	-	\$	1,681,013
Equity securities:								
Consumer discretionary		367,052		-		-		367,052
Consumer staples		180,702		-		-		180,702
Energy		467,297		-		-		467,297
Financials		217,287		-		-		217,287
Health care		382,403		-		-		382,403
Industrials		345,764		-		-		345,764
Information technology		762,872		-		-		762,872
Materials		178,151		-		-		178,151
Real estate		56,004	_				_	56,004
Total equity securities		2,957,532		-		-		2,957,532
Limited partnership		-		-		180,000		180,000
Beneficial interest in trusts			_			1,125,022	_	1,125,022
	<u>\$</u>	4,638,545	<u>\$</u>		\$	1,305,022	<u>\$</u>	5,943,567

16. FAIR VALUE MEASUREMENTS (CONTINUED)

	2012							
		Level 1		Level 2		Level 3		<u>Total</u>
Mutual funds:								
Short-term bond	\$	1,716,635	\$	-	\$	-	\$	1,716,635
Equity securities:								
Consumer discretionary		299,644		-		-		299,644
Consumer staples		93,460		-		-		93,460
Energy		257,271		-		-		257,271
Financials		147,205		_		-		147,205
Health care		405,629		-		-		405,629
Industrials		195,541		-		-		195,541
Information technology		1,042,853		-		-		1,042,853
Materials		158,380				<u>-</u>		158,380
Total equity securities		2,599,983		-		-		2,599,983
Beneficial interest in trusts		-			_	1,057,672	_	1,057,672
	\$	4,316,618	<u>\$</u>		<u>\$</u>	1,057,672	\$	5,374,290

The following table sets forth a summary of changes in the fair value of the Organization's beneficial interest in trusts and limited partnership investment (level 3 assets) for the years ended June 30:

	2013				
	Ī	eneficial nterests n Trusts	Limited Partnership		
Balance, beginning of year	\$	1,057,672	\$	-	
Earnings and investment gains		105,754		-	
Gifts received		1,567		180,000	
Grants authorized		(33,944)		-	
Administrative fees		(6,027)		-	
Balance, end of year	<u>\$</u>	1,125,022	\$	180,000	

16. FAIR VALUE MEASUREMENTS (CONTINUED)

	2012 Beneficial Interests in Trusts			
Balance, beginning of year	\$	1,104,299		
Earnings and investment gains (losses)		(23,833)		
Gifts received		6,484		
Grants authorized		(23,231)		
Administrative fees		(6,047)		
Balance, end of year	<u>\$</u>	1,057,672		

17. FISCAL SPONSOR

The Organization serves as the fiscal sponsor for the Worcester Education Collaborative and the Investing in Girls Alliance. The Organization maintains legal and fiduciary responsibility for the employees and activities of these programs. Total revenue for these programs during 2013 and 2012 was \$267,270 and \$295,687, respectively. Total expense for these programs during 2013 was \$237,937 of which \$8,860 and \$8,859 was allocated to administration and finance and fundraising, respectively. Total expense for these programs during 2012 was \$295,475 of which \$7,205 and \$7,229 was allocated to administration and finance and fundraising, respectively. A total of \$250,832 and \$221,499 is included as temporarily restricted net assets for these programs as of June 30, 2013 and 2012.

18. CONTINGENCIES

The Organization owns and occupies condominium space in a building in Worcester, Massachusetts. The Organization is the largest owner of the condominium space, owning fifteen percent. Due to the age of the building, the Organization may be subject to special assessments to maintain and repair the building. As of June 30, 2013, the Organization is unable to estimate the extent of or dollar amount of future special assessments. The special assessments, when they occur, may have a material impact on the Organization's financial statements.

The Organization may become involved in litigation or other claims in the ordinary course of business. Management is not aware of any claims that will have a material adverse effect on the financial condition of the Organization.

* * * * *

CEO/CFO Financial Statement Certification

CERTIFICATIONS

I hereby certify that:

- 1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2013.
- 2. Based on my knowledge, these financial statements do not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading.
- 3. Based on my knowledge, the financial statements and other financial information included in this report, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2013.

Timothy J. Garvin

President and Chief Executive Officer

Date /2/4/2013

James L. Hayes

Vice President, Finance and Operations

Date 12/4/2013

Sub-Certification of Financial Statements

CERTIFICATIONS

I hereby certify that:

- 1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2013.
- 2. I have disclosed to our organization's auditors all relevant controls and procedures established to assure the accuracy and integrity of information provided by my team;
- 3. I have reported to the Audit Committee any known or observed deficiencies in internal controls or fraud involving management;
- 4. Based on my knowledge, the portions of the financial statements that are based on information originating from my team do not contain any untrue statement of a material fact or omit to state a material fact necessary to ensure that the statements made, in light of the circumstances under which such statements were made, are not misleading;
- 5. Based on my knowledge, the financial statements and other financial information included in this report that pertain to information originating from my team, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2013.

Timothy J. Garvin

President and Chief Executive Officer

Date 12/4/2013

James L. Hayes

Vice President, Pinance and Operations

Date 12/4/2013