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Form 990

Return of Organization Exempt From Income Tax

2012

Open to Public
Inspection

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

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

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

B Check if applicable	C Name of organization UNITED WAY OF GREATER LORAIN COUNTY INC		D Employer identification number 34-1011104
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (440) 277-6530
<input type="checkbox"/> Terminated			
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 LORAIN, OH 44055		
<input type="checkbox"/> Application pending			G Gross receipts \$ 2,951,261

F Name and address of principal officer
WILLIAM P HARPER
1875 NORTH RIDGE ROAD NO H
LORAIN, OH 44055H(a) Is this a group return for affiliates? Yes NoH(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

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

J Website: ► WWW.UWLORAINCOUNTY.ORG

K Form of organization Corporation Trust Association Other ► L Year of formation 1967 M State of legal domicile OH

Part I Summary

1 Briefly describe the organization's mission or most significant activities TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF OUR COMMUNITY THROUGH LEADERSHIP, COLLABORATION, AND RESOURCE DEVELOPMENT	
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets	
3 Number of voting members of the governing body (Part VI, line 1a)	3 16
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 16
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5 8
6 Total number of volunteers (estimate if necessary)	6 542
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0
b Net unrelated business taxable income from Form 990-T, line 34	7b 0

8 Contributions and grants (Part VIII, line 1h)	Prior Year 2,902,318	Current Year 2,873,479
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	57,792	62,285
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	38,737	15,497
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,998,847	2,951,261

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,926,838	1,628,676
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	447,761	470,021
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ► 217,340		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	322,785	346,100
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,697,384	2,444,797
19 Revenue less expenses Subtract line 18 from line 12	301,463	506,464

20 Total assets (Part X, line 16)	Beginning of Current Year 3,711,061	End of Year 3,961,267
21 Total liabilities (Part X, line 26)	1,959,478	1,623,559
22 Net assets or fund balances Subtract line 21 from line 20	1,751,583	2,337,708

Part II Signature Block

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

Sign Here	***** Signature of officer WILLIAM P HARPER EXECUTIVE DIRECTOR Type or print name and title	2014-01-24 Date
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Paid Preparer Use Only	Print/Type preparer's name LAURA J WHITE	Preparer's signature	Date 2014-01-24	Check <input type="checkbox"/> if self-employed	PTIN P00186264
	Firm's name ► COHEN & COMPANY LTD			Firm's EIN ► 34-1912961	
	Firm's address ► OFFICES LISTED AT WWWCOHENCPACOM, OH 44115			Phone no (800) 229-1099	

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III **1** Briefly describe the organization's mission

TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF OUR COMMUNITY THROUGH LEADERSHIP, COLLABORATION, AND RESOURCE DEVELOPMENT

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 1,874,692 including grants of \$ 1,628,676) (Revenue \$)

COMMUNITY IMPACT FUNDS PROGRAMS IN THE FOLLOWING AREAS STRENGTHENING FAMILIES, NURTURING CHILDREN AND YOUTH, AND CARING FOR BASIC NEEDS. GOAL IS TO ENHANCE THE QUALITY OF LIFE FOR INDIVIDUAL FAMILIES. THIS IMPACT AREA OFFERS A RANGE OF PROGRAMS WHICH SUPPORT FAMILIES AS WELL AS NURTURERS, CARETAKERS, AND INSTRUCTORS. THESE PROGRAMS ASSIST FAMILIES AND FAMILY MEMBERS IN FUNCTIONING AT THE HIGHEST DEGREE POSSIBLE. THE GOAL FOR NURTURING CHILDREN AND YOUTH IS TO ENSURE THAT EVERY CHILD IS PROVIDED A HEALTHY, NURTURING, AND SAFE LEARNING ENVIRONMENT TO LIVE, LEARN AND GROW. FUNDED PROGRAMS PROVIDE ASSISTANCE IN DEVELOPING ASSETS AND PROTECTIVE FACTORS WHICH ARE PROVEN TO REDUCE RISK FACTORS IN A CHILD'S OR YOUTH'S LIFE. THE GOAL FOR CARING FOR BASIC NEEDS IS TO PROVIDE PEOPLE LIVING IN LORAIN COUNTY WITH TOOLS TO MEET THEIR BASIC NEEDS FOR SAFETY, NUTRITION, SAFE AND AFFORDABLE SHELTER, CRISIS INTERVENTION AND OTHER SITUATIONS REQUIRING EMERGENCY ASSISTANCE - 102,735 PEOPLE SERVED

4b (Code) (Expenses \$ 90,903 including grants of \$) (Revenue \$)

INFORMATION AND REFERRAL - REFER PEOPLE TO SERVICES AND VOLUNTEER OPPORTUNITIES AT LOCAL AGENCIES THROUGH UNITED WAY'S FIRST CALL FOR HELP, A CONFIDENTIAL, FREE INFORMATION AND REFERRAL SERVICE - 17,971 PEOPLE SERVED

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

FINANCIAL STABILITY - UNITED WAY OF GREATER LORAIN COUNTY COLLABORATED WITH THE EARNED INCOME TAX CREDIT (EITC) COALITION IN PROMOTING FINANCIAL STABILITY. THE COALITION OFFERED FREE TAX PREPARATION TO QUALIFIED FILERS DURING THE TAX SEASON. INDIVIDUALS WHO CAME TO HAVE THEIR TAXES PREPARED (1,387) RESULTED IN TOTAL ESTIMATED SAVINGS OF \$278,200 IN TAX RETURN PREPARATION FEES, AND RECEIVED TOTAL NET REFUND OF \$1,885,602. THOSE WHO QUALIFIED RECEIVED \$688,417 FROM THE EARNED INCOME TAX CREDIT

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

4e Total program service expenses ► 1,965,595

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

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

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

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
- d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XI

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

- 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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

- 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

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

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

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)

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

- b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No
8		No
9		No
10	Yes	
11a	Yes	
11b		No
11c		No
11d		No
11e		No
11f	Yes	
12a	Yes	
12b		No
13		No
14a		No
14b		No
15		No
16		No
17		No
18		No
19		No
20a		No
20b		

Part IV Checklist of Required Schedules (continued)

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	Yes	
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	No	
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	No	
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	No	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No	
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	No	
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	No	
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	No	
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)	28a	No	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	No	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	No	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	No	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	No	
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	34	No	
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	35a	No	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b		
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	36	No	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37	No	
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	38	Yes	
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			

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	4	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	8	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No	
b If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No	
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	No	
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).	7a	No	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	No	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d If "Yes," indicate the number of Forms 8282 filed during the year	7e	No	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	No	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8		
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?	9a		
9 Sponsoring organizations maintaining donor advised funds.	9b		
a Did the organization make any taxable distributions under section 4966?			
b Did the organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter	10a		
a Initiation fees and capital contributions included on Part VIII, line 12	10b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter	11a		
a Gross income from members or shareholders	11b		
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.	13a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13b		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	16	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b Enter the number of voting members included in line 1a, above, who are independent	1b	16	
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		No
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		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
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		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

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

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed OH
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 DIANNE BREHM 1875 NORTH RIDGE ROAD SUITE H LORAIN, OH (440) 277-6530

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Office	Key Employee	Highest Compensated	Former			
(1) WENDY HOLLIDAY SECRETARY	1 00	X		X				0	0	0
(2) REBECCA GRUNICK BOARD MEMBER	1 00	X						0	0	0
(3) EDWARD BAKER BOARD MEMBER	1 00	X						0	0	0
(4) DOUG BLOOMFIELD BOARD MEMBER	1 00	X						0	0	0
(5) KAREN COOK BOARD MEMBER	1 00	X						0	0	0
(6) JAMES DOWDELL BOARD MEMBER	1 00	X						0	0	0
(7) EDWIN GARCIA BOARD MEMBER	1 00	X						0	0	0
(8) GREGORY KULOW BOARD MEMBER	1 00	X						0	0	0
(9) THOMAS HOOVER BOARD MEMBER	1 00	X						0	0	0
(10) AMY SZMANIA VICE PRESIDENT	1 00	X		X				0	0	0
(11) KEITH BROWN BOARD MEMBER	1 00	X						0	0	0
(12) JOSE MATOS BOARD MEMBER	1 00	X						0	0	0
(13) CARRIE SECHEL BOARD MEMBER	1 00	X						0	0	0
(14) CYNTHIA TOMASCH PAST PRESIDENT	1 00	X		X				0	0	0
(15) SANDRA HODGE PRESIDENT	1 00	X		X				0	0	0
(16) CHERYL MCKENNA TREASURER	1 00	X		X				0	0	0
(17) DIANNE BREHM FINANCE DIRECTOR	40 00			X				68,047	0	9,892

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

Section B. Independent Contractors

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d	239,549		
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,633,930		
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		2,873,479		
Program Service Revenue	2a	Business Code			
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest, and other similar amounts)		51,888		51,888
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses	10,397				
c Gain or (loss)	0				
d Net gain or (loss)	10,397				10,397
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less direct expenses	b				
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11a ADMINISTRATION FEE INC	900099	14,457	14,457		
b MISCELLANEOUS INCOME	900099	1,040	1,040		
c					
d All other revenue					
e Total. Add lines 11a-11d		15,497			
12 Total revenue. See Instructions		2,951,261	15,497	0	62,285

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,628,676	1,628,676		
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	163,403	54,740	62,093	46,570
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	210,380	70,477	79,945	59,958
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	13,134	4,400	4,991	3,743
9 Other employee benefits	53,649	17,972	20,387	15,290
10 Payroll taxes	29,455	9,867	11,193	8,395
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	13,058	5,333	4,451	3,274
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	16,341		16,341	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,799	2,368	1,977	1,454
12 Advertising and promotion	27,605	14,182	129	13,294
13 Office expenses	29,119	10,227	10,749	8,143
14 Information technology	12,731	3,783	4,979	3,969
15 Royalties				
16 Occupancy	52,288	19,663	18,528	14,097
17 Travel	607	273	177	157
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	23,473	10,567	6,825	6,081
20 Interest				
21 Payments to affiliates	33,824	11,331	12,853	9,640
22 Depreciation, depletion, and amortization	11,760	3,939	4,469	3,352
23 Insurance	4,672	1,566	1,775	1,331
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a CONTRACT SERVICES	73,912	73,912		
b CAMPAIGN EXPENSES	40,911	22,319		18,592
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,444,797	1,965,595	261,862	217,340
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X

		(A) Beginning of year	(B) End of year	
Assets	1 Cash—non-interest-bearing	121,593	1 44,883	
	2 Savings and temporary cash investments	10,710	2 135,828	
	3 Pledges and grants receivable, net	1,047,769	3 1,077,293	
	4 Accounts receivable, net	7,979	4 0	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6
	7 Notes and loans receivable, net			7
	8 Inventories for sale or use			8
	9 Prepaid expenses and deferred charges	4,296	9 4,548	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	166,902	
	b Less accumulated depreciation	10b	149,328	16,132 10c 17,574
	11 Investments—publicly traded securities		2,478,088	11 2,657,527
	12 Investments—other securities See Part IV, line 11		19,962	12 20,561
	13 Investments—program-related See Part IV, line 11			13
	14 Intangible assets			14
	15 Other assets See Part IV, line 11		4,532	15 3,053
16 Total assets. Add lines 1 through 15 (must equal line 34)		3,711,061	16 3,961,267	
Liabilities	17 Accounts payable and accrued expenses	465,750	17 491,183	
	18 Grants payable	1,471,978	18 1,126,876	
	19 Deferred revenue	21,750	19 5,500	
	20 Tax-exempt bond liabilities			20
	21 Escrow or custodial account liability Complete Part IV of Schedule D			21
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22
	23 Secured mortgages and notes payable to unrelated third parties			23
	24 Unsecured notes and loans payable to unrelated third parties			24
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25
	26 Total liabilities. Add lines 17 through 25		1,959,478	26 1,623,559
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,137,229	27 1,429,605	
	28 Temporarily restricted net assets	594,392	28 887,542	
	29 Permanently restricted net assets	19,962	29 20,561	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds			30
	31 Paid-in or capital surplus, or land, building or equipment fund			31
	32 Retained earnings, endowment, accumulated income, or other funds			32
	33 Total net assets or fund balances	1,751,583	33 2,337,708	
	34 Total liabilities and net assets/fund balances	3,711,061	34 3,961,267	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,951,261
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,444,797
3	Revenue less expenses Subtract line 2 from line 1	3	506,464
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,751,583
5	Net unrealized gains (losses) on investments	5	66,486
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	13,175
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,337,708

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
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? 3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	No
	3b	

SCHEDULE A
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public
Inspection**

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

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

Department of the Treasury
Internal Revenue Service**Name of the organization**

UNITED WAY OF GREATER LORAIN COUNTY INC

Employer identification number

34-1011104

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

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

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)

3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

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

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

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

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

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

9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)

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

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

e a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated

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

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

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

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

i Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization in col (i) organized in the U S ?	(vii) Amount of monetary support
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,734,557	2,544,250	2,670,067	2,902,318	2,873,479	13,724,671
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	2,734,557	2,544,250	2,670,067	2,902,318	2,873,479	13,724,671
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						13,724,671

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	2,734,557	2,544,250	2,670,067	2,902,318	2,873,479	13,724,671
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	70,028	63,955	58,639	58,692	51,888	303,202
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		37,139	49,485	38,737	15,497	140,858
11 Total support (Add lines 7 through 10)						14,168,731
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ►						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	96 870 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	96 570 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ►✓		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ►□		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►□		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►□		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ►□		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
16 Public support percentage from 2011 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	

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

Facts And Circumstances Test

Explanation

SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME MISCELLANEOUS INCOME - 2009 AMOUNT \$ 4,561 2010 AMOUNT \$ 96 2011 AMOUNT \$ 1,081 2012 AMOUNT \$ 1,040 ADMINISTRATIVE FEES - 2009 AMOUNT \$ 26,893 2010 AMOUNT \$ 49,389 2011 AMOUNT \$ 37,656 2012 AMOUNT \$ 14,457 SPECIAL EVENT - 2009 AMOUNT \$ 5,685

SCHEDULE D
(Form 990)**Supplemental Financial Statements****2012****Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue ServiceName of the organization
UNITED WAY OF GREATER LORAIN COUNTY INCEmployer identification number
34-1011104**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____	2d

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

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

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

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

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

9 In Part 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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> Preservation for future generations	

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	19,962	20,332	17,721	15,622	15,622
b Contributions					
c Net investment earnings, gains, and losses	599	-370	2,611	2,099	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	20,561	19,962	20,332	17,721	15,622

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

a Board designated or quasi-endowment

b Permanent endowment 100 000 %

c Temporarily restricted endowment

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

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

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

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

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

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land					
b Buildings					
c Leasehold improvements		27,679	27,475	204	
d Equipment		102,706	95,512	7,194	
e Other		36,517	26,341	10,176	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					17,574

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ►		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ►		

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

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ►	

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

(a) Description of liability	(b) Book value	
1 Federal income taxes		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ►		

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

1	Total revenue, gains, and other support per audited financial statements	1	2,522,862
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	66,486
b	Donated services and use of facilities	2b	23,256
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	89,742
3	Subtract line 2e from line 1	3	2,433,120
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,341
b	Other (Describe in Part XIII)	4b	501,800
c	Add lines 4a and 4b	4c	518,141
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,951,261

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

1	Total expenses and losses per audited financial statements	1	1,949,912
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	23,256
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	23,256
3	Subtract line 2e from line 1	3	1,926,656
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,341
b	Other (Describe in Part XIII)	4b	501,800
c	Add lines 4a and 4b	4c	518,141
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,444,797

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ORGANIZATION INCLUDES THE EARNINGS FROM THE ENDOWMENT FUND IN THEIR GENERAL FUNDS TO BE ALLOCATED TO VARIOUS ORGANIZATIONS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE ORGANIZATION RECOGNIZES AND DISCLOSES UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH GAAP AS OF AND DURING THE YEARS ENDED JUNE 30, 2013 AND 2012, THE ORGANIZATION DOES NOT HAVE A LIABILITY FOR UNRECOGNIZED TAX BENEFITS THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES PRIOR TO 2010
PART XI, LINE 4B - OTHER ADJUSTMENTS		DESIGNATED CONTRIBUTIONS WHICH ARE NOT SHOWN AS REVENUE ON THE FINANCIAL STATEMENTS
PART XII, LINE 4B - OTHER ADJUSTMENTS		GRANTS OF DESIGNATED CONTRIBUTIONS WHICH ARE NOT SHOWN AS EXPENSES ON THE FINANCIAL STATEMENTS

Schedule I (Form 990)

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

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

► Attach to Form 990

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF GREATER LORAIN COUNTY INC

Employer identification number

Name of the organization

Part I General Information on Grants and Assistance

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

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

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

(a) Name and address of organization or government **(b) EIN** **(c) IRC Code 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**

See Additional Data Table

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE UNITED WAY OF GREATER LORAIN COUNTY GRANTS FUNDS TO LOCAL PARTNER AGENCIES THAT PROVIDE HIGH QUALITY HUMAN SERVICES TO RESIDENTS. WE STRIVE FOR MEANINGFUL AND MEASURABLE IMPACT IN THE THREE AREAS OF COMMUNITY IDENTIFIED NEEDS NURTURING CHILDREN AND YOUTH, STRENGTHENING FAMILIES AND MEETING BASIC NEEDS. THE UNITED WAY BELIEVES THAT A NON-PROFIT HAS TO BE WELL-MANAGED AND EFFECTIVELY GOVERNED TO MEET COMMUNITY NEEDS AND CHANGE COMMUNITY CONDITIONS. ANY ORGANIZATION THAT RECEIVED DONOR FUNDS PARTICIPATES IN A MULTI-PHASE EVALUATION PROCESS THAT INCLUDES A REVIEW OF THE AGENCYS GOVERNANCE, OPERATIONAL AND FINANCIAL PRACTICES, A COMPREHENSIVE PROGRAM REVIEW, AND AN ON-SITE PRESENTATION AND FACILITIES ANALYSIS. AFTER ASSURING AN AGENCYS HEALTH, THE VOLUNTEERS FOCUS THEIR EVALUATION ON THE PROGRAMS PROPOSED USE OF FUNDS AND THE OUTCOMES AND RESULTS OF ALL PROVIDED SERVICES. AGENCIES THAT RECEIVE FUNDING MUST ALSO SHOW COMPLIANCE WITH THE PROVISIONS OF THE PATRIOT ACT AND PROVIDE DOCUMENTATION FROM THE INTERNAL REVENUE SERVICE OF TAX DEDUCTION ELIGIBILITY.

Software ID:**Software Version:****EIN:** 34-1011104**Name:** UNITED WAY OF GREATER LORAIN COUNTY INC**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
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AMERICAN CANCER SOCIETY 10501 EUCLID AVENUE CLEVELAND, OH 44106	13-1788491	501(C)(3)	9,484				COMMUNITY SERVICE
AMERICAN RED CROSS LORAIN COUNTY CHAPTER 2929 WEST RIVER ROAD ELYRIA, OH 44035	34-0900019	501(C)(3)	113,488				DISASTER RELIEF, EMERGENCY ASSISTANCE, EDUCATION & TRAINING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BIG BROTHERS BIG SISTERS OF LORAIN COUNTY 1917 NORTH RIDGE ROAD EAST SUITE A LORAIN, OH 44055	34-1809153	501(C)(3)	31,539				COMMUNITY BASED & SCHOOL BASED MENTORING
BLESSING HOUSE ASSOCIATION 5440 GROVE AVENUE LORAIN, OH 44055	30-0130029	501(C)(3)	48,201				CHILDREN CRISIS CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BOYS & GIRLS CLUBS OF LORAIN COUNTY PO BOX 516 OBERLIN, OH 44074	34-1856214	501(C)(3)	92,206				CORE YOUTH PROGRAMS
CATHOLIC CHARITIES CORP 7911 DETROIT AVENUE CLEVELAND, OH 44102	34-1318541	501(C)(3)	59,246				COMMUNITY SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CHILDREN'S DEVELOPMENTAL CENTER 150 ERIE COURT AMHERST, OH 44001	34-0789758	501(C)(3)	94,309				OUTPATIENT REHABILITATION
CLEVELAND HEARING & SPEECH CENTER 11635 EUCLID AVENUE CLEVELAND, OH 44106	34-0714648	501(C)(3)	21,600				COMMUNITY SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
COMMON GROUND CENTER 14240 BAIRD ROAD OBERLIN, OH 44074	34-1838503	501(C)(3)	12,616				YOUTH DEVELOPMENT
EL CENTRO DE SERVICIOS SOCIALES INC 1888 EAST 31ST STREET LORAIN, OH 44055	34-1165756	501(C)(3)	77,049				SENIOR CENTER, VIOLENCE PREVENTION, YOUTH LEADERSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
FAITH HOUSE 3250 WEST MARKET STREET 204 FAIRLAWN, OH 44333	34-1938397	501(C)(3)	28,000				TRANSITIONAL HOUSING
FAMILY PLANNING SERVICES 602 LEONA STREET ELYRIA, OH 44035	34-1042711	501(C)(3)	29,970				CLINICAL SERVICES & HEALTH EDUCATION PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
GIRL SCOUTS OF NE OHIO - WEST REGION ONE GIRL SCOUT WAY MACEDONIA, OH 44056	34-0726094	501(C)(3)	32,078				SCOUTING - LORAIN COUNTY
LEGAL AID SOCIETY OF CLEVELAND 538 WEST BROAD STREET SUITE 300 ELYRIA, OH 44035	34-0866026	501(C)(3)	18,856				OUTREACH & VOLUNTEER LAWYERS PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
LINDEN SCHOOL 424 EARL COURT ELYRIA, OH 44035	34-1597874	501(C)(3)	19,026				EARLY CHILDHOOD EDUCATION AND CARE
LINKING EMPLOYMENT ABILITIES POTENTIAL 1468 WEST 25TH STREET CLEVELAND, OH 44113	34-1369608	501(C)(3)	28,714				INDEPENDENT LIVING PROGRAM AND COMMUNITY EMPLOYMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICE 2115 WEST PARK DRIVE LORAIN, OH 44053	34-1341788	501(C)(3)	46,251			WOMEN WITH CHILDREN TREATMENT PROGRAM	
LORAIN COUNTY LABOR AGENCY 1936 COOPER FOSTER PARK ROAD LORAIN, OH 44053	23-7387509	501(C)(3)	6,180			BENEFITS & TAX ASSISTANCE PROGRAM	

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
LORAIN COUNTY OFFICE ON AGING 226 MIDDLE AVENUE ELYRIA, OH 44035	34-1136543	501(C)(3)	45,702				PROGRAM FOR SENIORS
LORAIN COUNTY SAFE HARBORGENESIS HOUSE PO BOX 718 LORAIN, OH 44052	34-1774211	501(C)(3)	50,106				BATTERED WOMEN'S SHELTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
LORAIN COUNTY URBAN LEAGUE 401 BROAD STREET SUITE B ELYRIA, OH 44035	34-1263379	501(C)(3)	80,926				FAIR HOUSING AND EMPLOYMENT PROGRAMS
LUCY IDOL CENTER FOR THE HANDICAPPED PO BOX 162 VERMILION, OH 44089	34-0893458	501(C)(3)	48,625				REHABILITATION & MOBILITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
MERCY FOUNDATION KOLBE ROAD LORAIN, OH 44053	34-0936851	501(C)(3)	10,674				COMMUNITY SERVICES
NEIGHBORHOOD HOUSE ALLIANCE PO BOX 1039 LORAIN, OH 44052	34-0714471	501(C)(3)	141,778				HOMEMAKER ASSISTANCE, CHILD CARE, SENIOR SOCIALIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
NORD CENTER 6140 SOUTH BROADWAY LORAIN, OH 44053	34-0949459	501(C)(3)	71,316				HOUSING SERVICES & KIDZ FIRST
OBERLIN EARLY CHILDHOOD 317 EAST COLLEGE STREET OBERLIN, OH 44074	23-7313925	501(C)(3)	24,600				CHILDCARE ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
SAINT JOSEPH ACADEMY 3430 ROCKY RIVER DR NW CLEVELAND, OH 44111	34-1618516	501(C)(3)	5,000				YOUTH EDUCATION
SECOND HARVEST FOOD BANK OF NORTH CENTRAL OHIO 7445 DEER TRAIL LANE LORAIN, OH 44053	34-1446685	501(C)(3)	108,123				FOOD BANK

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
VOCATIONAL GUIDANCE SERVICES 359 LOWELL STREET ELYRIA, OH 44035	34-0714650	501(C)(3)	17,680				EMPLOYMENT SERVICES
VOLUNTEER GUARDIANSHIP PROGRAM 5201 ABBE ROAD ELYRIA, OH 44035	34-1899498	501(C)(3)	13,798				GUARDIANSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
YOUTH CHALLENGE INC 800 SHARON DRIVE WESTLAKE, OH 44145	34-1396825	501(C)(3)	7,213				YOUTH SERVICES
YWCA OF ELYRIA 318 WEST AVENUE ELYRIA, OH 44035	34-0718418	501(C)(3)	23,089				TRANSITIONAL HOUSING

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**

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

2012**Open to Public
Inspection**Name of the organization
UNITED WAY OF GREATER LORAIN COUNTY INC**Employer identification number**

34-1011104

Identifier	Return Reference	Explanation
CHANGES IN PROGRAM SERVICES	FORM 990, PART III, LINE 3	ONE OF THE MANY STRENGTHS OF THE UNITED WAY SYSTEM IS THE PLANNING PROCESS BY WHICH VOLUNTEERS SERVING ON IMPACT ADVISORY COUNCILS IDENTIFY TARGET OUTCOMES AND STRATEGIES AIMED AT MAKING A DIFFERENCE IN COMMUNITY CONDITIONS. UWGLC HAS CHANGED THEIR ALLOCATION PROCESS BEGINNING NEXT FISCAL YEAR, FROM FUNDING PROGRAMS OF 501(C)(3) AGENCIES TO FUNDING COLLABORATIVES WHICH WILL CONSIST OF THREE OR MORE ENTITIES. THE ORGANIZATION IS TAKING A COLLABORATIVE APPROACH TO SOLVING SPECIFIC SOCIAL PROBLEMS, USING A SINGLE SET OF GOALS, MEASURED IN THE SAME WAY TO DEMONSTRATE IMPACT. COMMUNITY COLLABORATIVES PROPOSALS ARE REVIEWED BY AN EXPERT PANEL AND RECOMMENDATIONS FORWARDED TO THE UWGLC BOARD OF DIRECTORS. THE BOARD, IN TURN, MAKES INVESTMENTS IN PROGRAMS AND INITIATIVES THAT HOLD THE MOST PROMISE FOR CREATING LONG-LASTING, SUSTAINABLE IMPROVEMENT IN COMMUNITY CONDITIONS. UNITED WAY OF GREATER LORAIN COUNTY (UWGLC) OFFERS INVESTORS THE OPPORTUNITY TO DESIGNATE THEIR GIFT TO SUPPORT SPECIFIED COMMUNITY IMPACT PRIORITIES AND COMMUNITY ORGANIZATIONS WITH MISSIONS THAT ARE CONSISTENT WITH THEIR OWN VALUES AND PERSPECTIVES. IN THE PAST UWGLC ALLOWED DESIGNATIONS ONLY TO 501(C)(3) HEALTH AND HUMAN SERVICE AGENCIES. UWGLC NOW PROVIDES THE OPPORTUNITY TO DESIGNATE INDIVIDUAL GIFTS IN ACCORDANCE WITH THE DESIRES OF THE INVESTOR WHO CAN DESIGNATE TO ANY ORGANIZATION IN AND OUTSIDE OF LORAIN COUNTY, OHIO, THAT QUALIFIES FOR TAX DEDUCTION PER THE INTERNAL REVENUE SERVICE. IN ORDER TO RECEIVE DESIGNATIONS, THE DESIGNATED ORGANIZATION MUST PROVIDE TO UWGLC - DOCUMENTATION FROM THE INTERNAL REVENUE SERVICE OF TAX DEDUCTION ELIGIBILITY - ANTI-TERRORISM COMPLIANCE CERTIFICATION - ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE REVIEWS IN DETAIL THE FORM 990 AND APPROVES THE FORM TO BE FILED WITH THE IRS. THE COMPLETED FORM 990, IN ITS ENTIRETY, IS GIVEN TO THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS HAS AN OPPORTUNITY TO ASK ANY QUESTIONS. THE FORM 990 IS THEN APPROVED BY THE ENTIRE BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION B, LINE 12C	AN ANNUAL QUESTIONNAIRE IS SENT TO ALL OFFICERS, DIRECTORS AND EMPLOYEES. IF A TRANSACTION ARISES, IN WHICH AN INDIVIDUAL HAS A CONFLICT, THE PERSON IS EXCUSED FROM THE DISCUSSION AND VOTE BY DISINTERESTED COMMITTEE MEMBERS TAKES PLACE. THE DIRECTORS AND/OR COMMITTEE MEMBERS BASE THEIR DECISION ON ALL THE FACTS AND CIRCUMSTANCES PRESENTED AND CONSIDER WHETHER THE TRANSACTION IS IN THE BEST INTEREST OF THE CORPORATION. PROPER RECORDS OF THE BOARD, COMMITTEE, OR SUBCOMMITTEE ARE MAINTAINED TO VERIFY THAT THE CONFLICT OF INTEREST POLICY HAS BEEN FOLLOWED
	FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION STUDY WAS PERFORMED USING AN OUTSIDE INDEPENDENT COMPANY. EACH POSITION WAS STUDIED WITH COMPARABLE DATA SHOWING A RANGE OF SALARIES FOR EACH POSITION. BUDGET WITH SALARY INFORMATION IS THEN APPROVED BY THE FINANCE COMMITTEE. EXECUTIVE COMMITTEE REVIEWS AND APPROVES EXECUTIVE DIRECTOR SALARY. BOARD OF DIRECTORS APPROVES THE ENTIRE BUDGET
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. THE ORGANIZATION'S MOST RECENTLY COMPLETED FINANCIAL STATEMENT AND IRS FORM 990 ARE POSTED ON THE PUBLIC WEBSITE, WWW.UWLORAINCOUNTY.ORG. IN ADDITION, THE ORGANIZATION PRINTS AND DISTRIBUTES TO THE COMMUNITY AN ANNUAL REPORT WHICH CONTAINS ACCOMPLISHMENTS AND SUMMARIZED FINANCIAL STATEMENTS