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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

Department of the Treasury

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

Open to Public

Inter	nal Rever	ue Service Ine organization	on may have to use a copy of this re	turn to satisfy stat			inspection
<u>A</u>	For the	2012 calendar year, or tax year		, 2012, and er	nding Ju	ne 30	, 20 13
В	Check if	applicable C Name of organization	United Way for Greater Austin			D Employ	er identification number
	Address		<u> </u>	. ,			74-1193439
Ц	Name cl		P O. box if mail is not delivered to street a	address) Roor	n/suite	E Telepho	ne number
	Initial ref						512-472-6267
	Termina	ed City, town or post office	e, state, and ZIP code			1	
	Amende					G Gross re	
Ш	Applicat	on pending F Name and address of p		resident			for affiliates? 🔲 Yes 🗹 No
		2000 E. MLK, Jr. Blvd	J., Austin, TX 78702				ncluded? Yes No
<u></u>	Tax-exe	npt status 501(c)(3)		947(a)(1) or 52	7 If "N	lo," attach a	list. (see instructions)
<u>J</u>	Website						number >
K		rganization Corporation Trust	Association Other ▶	L Year of fo	rmation: 1952	M State	of legal domicile. TX
Р	art I	Summary					
	1	-	ion's mission or most significant				
ė		common good by driving meas	surable change and empowering p	eople to improv	e the quality of	ife for the	mselves and others.
Activities & Governance				••			
E	_				:		
Š	2	_	ganization discontinued its opera		ed of more thar		its net assets.
ঞ	3	-	of the governing body (Part VI, lin				22
<u>ies</u>	4		g members of the governing boo			4	22
Ξ	5		mployed in calendar year 2012 (5	93
ĄĊ	6		stimate if necessary)			6	9784
	7a		enue from Part VIII, column (C), li			7a	-0-
	b	Net unrelated business taxab	le income from Form 990-T, line	34	_	7b	-0-
		0 11 1 1 70	13701 5 413		Prior Y		Current Year
ě	8		t VIII, line 1h)			5,043,537	15,549,106
Revenue	9	Program service revenue (Par	-			378,353	412,685
æ	10	•	column (A), lines 3, 4, and 7d)			(47,876)	748,139
	11	Other revenue (Part VIII, colur	42,619	25,103			
	12		ough 11 (must equal Part VIII, col			5,416,633	16,735,033
	13		paid (Part IX, column (A), lines 1-	-	—),509,273	8,725,455
	14	·	ers (Part IX, column (A), line 4)			450 267	2 477 599
Expenses	15		employee benefits (Part IX, column			3,459,367	3,477,522
Ë	16a	Table 6 and a large state of the state of th	(Parik X reconstruct (A), line 11e) art (X, column (D) line 25) ▶				
쬬	b	Other common of (Data IX and IX	and A lines 114011 d 115 046	1,393,958		166 646	4 947 040
_	17	Total expenses (Part IX, Colu	mn (A), lines 119911d, 11f-24e) 17 must equal Part IX, column			2,166,616 5,135,256	1,847,910
	18 19				-	(718,623)	14,050,887 2,684,146
			tract line 18 from the 12	· · · · · ·	Beginning of Cu		End of Year
ts or	20	Total assets (Part X, Info (6)	JEN IIT		<u> </u>	6,811,006	6,649,703
Asse	21	Total liabilities (Part X, line 26			-	5.083.398	2,159,952
Net Assets Fund Balanc	22	Net assets or fund balances.	•			1,727,608	4,489,751
	art II	Signature Block	Gubiract fine 21 from the 20			1,727,000	4,400,701
			amined this return, including accompany	ing schedules and s	tatements and to t	he hest of r	ny knowledge, and helief it is
tru	e, correc	, and complete Declaration of prepare	er (other than officer) is based on all infor	nation of which prep	parer has any know	ledge	ny miomoty and bonon, it is
_		Atalleu	W. Starl	ni)			
Sig	gn .	Signature of officer	1		Da	ite /	
He		Kathleev	1 W. tarlou	N. IREA	RESIDER	11/2	1/2013
		Type or print name and title		7			
Pa	id	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN
						self-emp	
	epare se On				Firr	n's EIN ▶	•
U	e Oil	Firm's address ▶				ne no	,
Ма	y the II		preparer shown above? (see ins	structions)			Yes No
For	Papen	ork Reduction Act Notice, see	the separate instructions.	Ca	at. No 11282Y		Form 990 (2012)

Part l		
	Check if Schedule O contains a response to any question in this Part III	<u>v</u>
1	Briefly describe the organization's mission:	
	United Way for Greater Austin (UWATX) is a dynamic, impact-driven organization that addresses critical social issues by bring	
	people and resources together to create opportunities for individuals, families and neighborhoods to prosper. UWATX's wor	
	focused on education, health, and financial stability - the building blocks of a good life. We strategically focus our work in the	e
	areas of education, financial stability, and health by bringing together issue area expertise and community partnerships.	· -
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
		<u>⊾</u> 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?	
		₩ 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 mea expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported.	o otners
	the total expenses, and revenue, if any, for each program service reported.	
40	(Code:) (Expenses \$ 633,579 including grants of \$ -0-) (Revenue \$ 272,37	2 \
4a	(Code:) (Expenses \$ 633,579 including grants of \$ -0-) (Revenue \$ 272,37 Education focus area: Success By 6 -	<u>.</u>)
	United Way's Success By 6 (SB6) is a robust coalition of public and private partners working together to ensure that children	
	happy, healthy, and ready to learn by the time they enter kindergarten. By bringing the community together in partnership ar	
	collaboration, SB6 strives to assure that every child in central Texas is prepared for school success. Our goal is for children	
	enter kindergarten school-ready. To get there, SB6 will remove barriers that prevent economically vulnerable children from	
	receiving these critical services.	
	Progress in 2012-13 -	
	- SB6 convened and lead a large community coalition to develop a School Readiness Action Plan for Travis County. Goals,	
	strategies, and performance measures were identified through a collaborative process, and the plan was endorsed by the Ma	vor
	County Judge, City Council, and many other community coalitions. Work groups are now implementing the strategies.	
	County study, only Country, and many other community countries. Work groups are now implementing the strategies.	
	······	
4b	(Code:) (Expenses \$ 169,129 including grants of \$ -0-) (Revenue \$ 74,28	3)
	Income focus area: Financial Opportunity	'
	United Way empowers working poor families with the knowledge and tools to become financially stable. To achieve this, U	nited
	Way leads and participates in local initiatives and connects low income individuals to services such as safe and low cost final	
	services, free income tax preparation services, and financial education.	
	Progress in 2012-13 -	
	- Key financial stability programs were developed and delivered throughout the greater Austin area that included:	
	- Bank on Central Texas is a United Way program delivered in collaboration with 9 financial institutions, and has helped	over
	12,000 central Texans open bank accounts since its launch.	
	- Learn Where You Earn financial education program provided basic financial tools and insight in the workplace for over	600
	participants on topics including budgeting, credit, and debt management.	
	- United Way, in partnership with other area nonprofits and the City of Austin supported free tax preparation services to	over
	18,000 low income clients.	_
4c	(Code:) (Expenses \$ 155,383 including grants of \$ -0-) (Revenue \$ 66,03	0)
	Education focus area: Middle School Matters	
	Through deep and broad partnerships with nonprofit organizations and school leaders, Middle School Matters (MSM) strive	s to
	ensure that students have a wide range of vital adacemic, health and social services to be successful. MSM services suppor	t
	student resillence, strengthen familles, and engage the students with the surrounding community through high quality progr	amming
	and strategic collaboration.	
	Progress in 2012-13 -	
	- Over 1,100 students received one or more support services during the school year.	
	- Through the Youth Program Quality Initiative, over 290 youth-serving programs were assessed for excellence and now have	e
	improvement plans to assure that they're of the highest quality in central Texas.	
	- Over 600 youth workers to date participated in professional development training to deliver supportive and engaging progr	ams.
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 11,320,891 including grants of \$ 8,725,455) (Revenue \$ -0-)	
40	Total program convice expenses > 42 278 092	

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	~					
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to							
	candidates for public office? If "Yes," complete Schedule C, Part I	3		~				
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)							
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~				
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,							
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1		,				
	Part III	5						
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	1						
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	l						
	"Yes," complete Schedule D, Part I	6		-				
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,							
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		~				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	İ		١.				
	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			,				
40	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9						
10	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,	10						
••	VII, VIII, IX, or X as applicable.							
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			'				
_	complete Schedule D, Part VI	11a	V	•				
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		~				
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,				
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 ⁹ 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	11e	1					
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses							
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		~				
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	١		~				
	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 14a		V				
14 a b	and the second s	170		_				
D	fundraising, business, investment, and program service activities outside the United States, or aggregate							
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		~				
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any							
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		~				
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance							
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		~				
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		v				
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		v				
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		-				
10	If "Yes," complete Schedule G, Part III	19		,				
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~				
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b						
			n 99 0	(2012)				

Part I	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	>	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		V
b	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	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		~
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		١
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		V
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		١
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		V
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	7	

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>	<u></u>	
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 12			
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?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	_	
Lu	Statements, filed for the calendar year ending with or within the year covered by this return 2a 93			
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 <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		•
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		<u> </u>
_	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		~
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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
_, a	Initiation fees and capital contributions included on Part VIII, line 12			
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a 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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
.=	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	14-		-
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		~
b	ii rea, has it hied a rothi rzo to report these payments til No, provide arrexplanation in Schedule O.	טדו		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response to any question in this Part VI	ee ins	struct	ions.
Section	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	;		
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		,
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		•
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	~	<u> </u>
ь 9	Each committee with authority to act on behalf of the governing body?	8b	1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	/ - 1	
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a		
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 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	7 7	
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	<u>,</u>	-
13	Did the organization have a written whistleblower policy?	13	~	
14 15	Did the organization have a written document retention and destruction policy?	14	V	
а	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b		~
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ none 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(c)(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 or and financial statements available to the public during the tax year.			oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Debbie Bresette, 2000 E. MLK, Jr. Blvd., Austin, TX 78702 512-472-6267	of the)	

Eam	aan	(2012)	

Page 7

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

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

☑ Check this box if neither the organ	nization nor any relate	d org	aniz			ompe	nsa	ated any currer	t officer, director	r, or trustee.
		(C)								
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	unles er an	ss pe d a d	erson	s both	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Bill O'Brien	2.0									
Board Chair		~		1				-0-	-0-	-0-
(2) Catherine Q. Morse Chair-Elect	2.0	,		,				-0-	-0-	-0-
(3) Jon Armstrong	2.0						-			
Secretary		1		~				-0-	-0-	-0-
(4) Mike Blue	2.0									
Treasurer		'		1				-0-	-0-	-0-
(5) Becky Arreaga	2.0									
Director		'						-0-	-0-	-0-
(6) Marie Baker	2.0									
Director		"						-0-	-0-	-0-
(7) Heather Brunner	2.0									
Director		1	l					-0-	-0-	-0-
(8) Juan Gonzalez	2.0									
Director		1						-0-	-0-	-0-
(9) Dan Graham	2.0							1		
Director	* -	1						-0-	-0-	-0-
(10) Gayle Greer	2.0		Ì						`-	
Director		1						-0-	-0-	-0-
(11) Butch Hayes	2.0		Ì							
Director		"						-0-	-0-	-0-
(12) Tommy Hodinh	2.0			Γ						
Director		"						-0-	-0-	-0-
(13) Philip Huang, MD, MPH	2.0									 -
Director		"						-0-	-0-	-0-
(14) Don Kendrick	2.0									
Director		'		ĺ				-0-	-0-	-0-

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
Part	Section A. Onicers, Directors, Trus	lees, Key L	impio;	yee.		C)	iignes	3. 0		inployees (c	.011111100		
		Position								_			
	(A)	(B)	(do n	ot ch			than o	one	(D)	(E)			F)
	Name and title	Average					ıs both		Reportable	Reportable			mated
		hours per week (list any	office	er and	dad	irect	or/trust	ee)	compensation	compensation related	rom		unt of her
		hours for	우듄	<u> </u>	유	₩ 6	哥풊	2	the	organizatio	ns		ensation
		related organizations	d M	₹	Officer	Key employee	plos	Former	organization	(W-2/1099-MISC)	ISC)		n the
			당표	🗟	`	큧	9 2		(W-2/1099-MISC)				nzation related
		below dotted	ੇੜੋ	≗		ĕ	ğ						izations
		""",	Individual trustee or director	Institutional trustee		"	l ens						
			-	&			Highest compensated employee						
/4.E) Ha	ather Ladage	2.0		-					 				
Direct	····	ļ 2.0	1						-0-		-0-		-0-
	·	2.0	-					-					
32	cky Moeller	ļ 2 .U											
Direct			-						-0-		-0-		-0-
32	isty Ozmun	2.0				ł							_
Direct			-			<u> </u>		_	-0-		-0-		-0-
(18) Sh	eila Plank	2.0											
Direct	DF		~						-0-		-0-		-0-
(19) Je	ff Thomas	2.0											
Direct	 or	T	~						-0-		-0-		-0-
(20) De	nise M. Trouth	2.0								·			
Direct		†	1			İ			-0-		-0-		-0-
(21) Bi		2.0			\vdash								
Direct		†	1				ļ	-	-0-		-0-		-0-
	ward Zaroff	2.0				┢┈							
Direct		 	ر ا				1		-0-		-0-		-0-
			Ť		<u> </u>				 				
32	bble Bresette	40.0	┨		,	l			110,100		_0_	-0- 5,28	
Presid		40.0			-	-		├-	110,100		3,20		3,201
	eryl Black	40.0	1	ŀ	٠.				40.000				184
	Finance and Planning				~	_	<u> </u>		18,336		-0-	18	
2	ff Brennan	40.0	1		١.						_		
CFO						L	L		65,572			-0- 1,757	
1b	Sub-total				•				194,008		-0-		7,222
С	Total from continuation sheets to Part	: VII, Sectio	n A	•					-0-		-0-		-0-
d	Total (add lines 1b and 1c)								194,008		-0-		7,222
2	Total number of individuals (including bu	t not limited	d to th	ose	e list	ted	above	e) w	ho received m	ore than \$10	00,000	of	
	reportable compensation from the organ												
	······································												Yes No
3	Did the organization list any former o	fficer, direc	tor, c	or ti	rust	ee,	key 6	emp	oloyee, or high	est comper	nsated		
	employee on line 1a? If "Yes," complete											3	
4	For any individual listed on line 1a, is the	e sum of re	porta	ble	con	npei	nsatio	n a	and other come	ensation fro	om the		
•	organization and related organizations	greater th	an \$	150.	.000)? /	f "Ye	s."	complete Sch	edule J for	such		
	individual											4	
=	Did any person listed on line 1a receive	or accrue c	omne	กรล	tıon	fro	m anv	Lun	related organi	zation or ind	ividual		
5	for services rendered to the organization	2 If "Ves "	romn	lete	Scl	hedi	ıle .l t	for a	such nerson			5	
		700,	. در ۱۰۰۰										
	on B. Independent Contractors			l	اء ۔۔۔					- d	- 6100	000 of	
1	Complete this table for your five highest	compensat	ea in	aep	ena	ent	contr	act	ors that receive	ea more thai	n Siuu,	,UUU OI	mla tav
	compensation from the organization. Re	port compe	ensatio	on t	or tr	ne c	alend	ıar y	year ending wi	n or within t	ne orga	anızauc	on s tax
	year.												
(A)									(B)		,	(C)	
	Name and business ad	dress							Description of s	ervices		Compens	ation
	NONE												
												· · · · · ·	
2	Total number of independent contract	ors (ıncludı	ng bu	ut n	ot	limit	ted to	o th	nose listed ab	ove) who			
	received more than \$100,000 of comper								-0-				

Part	VIII	Statement of Reve	enue					
		Check if Schedule O	contains a respo	nse to any quest	ion in this Part VI			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ats	1a	Federated campaigns	s 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b					
S, C	С	Fundraising events .						
ia i	d	Related organizations						
JS,	е	Government grants (con		1,787,723				
tio Pr S	f	All other contributions, g						
혈粪		and similar amounts not inc		13,761,383				
ğ	g	Noncash contributions include		97,827				
	h	Total. Add lines 1a-1	<u>f</u>		15,549,106			
Program Service Revenue	_			Business Code			· · · · · · · · · · · · · · · · · · ·	
ě	2a	Service fee revenue		900099	396,175	396,175		
ě	b	Workshop training rev	venue	900099	16,510	16,510		-
<u>Ş</u> .	C							
နှ	d							-
raff	e	All all an analysis						-
<u> </u>	f	All other program ser Total. Add lines 2a-2	,	▶	412,685	I		<u> </u>
<u> </u>	<u>g</u> 3	Investment income			412,003			<u></u>
		and other similar amo			57,456			57,456
	4	Income from investmen		ļ.	5.,100			
	5	Royalties						
	•	rioyanioo	(i) Real	(II) Personal				
	6a	Gross rents						
	ь	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or		▶				
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	99,941	750,000				
	b	Less: cost or other basis				•		
		and sales expenses .	101,300	57,958				
	С	Gain or (loss)	(1,359)	692,042				
	d	Net gain or (loss) .		▶	690,683			690,683
venue	8a	Gross income from fuevents (not including \$						
Other Re			····a					
₹		Less: direct expenses				_		_
		Net income or (loss) f		events . ►				
		Gross income from gassee Part IV, line 19	···a					
	1	Less: direct expenses		[
	C	Net income or (loss) f		vities ▶				
	10a	Gross sales of in returns and allowance	iventory, less					
	١.		-					
	b	Less: cost of goods s		entory ►				
	<u>C</u>	Net income or (loss) 1 Miscellaneous F		Business Code		-		
	44-	Miscellaneous income		900099	25,103	25,103		
	11a b			50055	23,103	23,103		-
	C							_
	d	All other revenue .			-		•	
	e	Total. Add lines 11a-		▶	25,103		-	1
	140	Total rayonus Soci			46 725 022	427 700		740 420

Page 10 Form 990 (2012) Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX . (B) Program service expenses (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 8,725,455 8,725,455 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 194,008 128,211 10,318 55,479 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 2,721,558 1,799,771 142,988 778,799 Other salaries and wages 7 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 303,882 71,344 220,193 12,345 9 Other employee benefits 258,074 172,810 17,051 68,213 10 11 Fees for services (non-employees): а Legal b С Accounting e Professional fundraising services See Part IV, line 17 f Investment management fees . . . Other, (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O) 493.900 45.545 73.597 613.042 70,407 19,699 48,138 12 Advertising and promotion 138,244 212,442 101,129 13,955 97,358 13 Office expenses . . 141,713 86,233 23,211 32,269 14 Information technology . 15 Royalties 101,572 54,849 20,314 26,409 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 41,960 24,244 1,811 15,905 19 Conferences, conventions, and meetings . 35,229 19,023 7,045 9,161 20 Interest 128,613 69,451 25,723 33,439 21 Payments to affiliates 72,720 39,269 14,544 18,907 22 Depreciation, depletion, and amortization . 2,809 14,043 7,583 3,651 23 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.) Program expenses 186,153 186,153 Miscellaneous expenses 152,581 76,786 19,337 56.458 Bad debt recovery (47,811) (17,573) (22,846)(88, 230)In-kind expense 97,828 51,326 18,825 27,677 d All other expenses Total functional expenses. Add lines 1 through 24e 12,278,982 377,947 1,393,958 14,050,887 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and

fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Form 990 (2012) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) Beginning of year End of year 1 Savings and temporary cash investments 290,758 204.421 2 2 2,881,167 3,230,876 3 3 336,339 423,200 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 7 Inventories for sale or use R 8 23,093 41,814 Prepaid expenses and deferred charges . . . 9 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,542,861 Less: accumulated depreciation 2,692,470 964,743 10b 10c 850,391 b 2,314,906 1,899,001 11 Investments—publicly traded securities 11 Investments - other securities. See Part IV, line 11 . . . 12 13 Investments - program-related. See Part IV, line 11 13 14 14 15 15 6,811,006 16 6,649,703 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 17 Accounts payable and accrued expenses 515,031 17 178,151 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule ${\bf D}\,$. 21 21 Loans and other payables to current and former officers, directors, 22 Liabilities 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 . . . 795,176 472,853 23 Unsecured notes and loans payable to unrelated third parties . . . 24 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 3,773,191 1,508,948 25 Total liabilities. Add lines 17 through 25 5,083,398 26 26 2,159,952 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 574,324 27 3,560,792 656,654 28 432,329 28 Temporarily restricted net assets 496,630 29 496,630 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds. 32 32

Total liabilities and net assets/fund balances . . .

33

Form **990** (2012)

4,489,751

6,649,703

1,727,608

6,811,006 34

33

Page **12**

•									
Part									
	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			5,033 0,887				
2	Total expenses (must equal Part IX, column (A), line 25)								
3	Revenue less expenses. Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,72	7,608				
5	Net unrealized gains (losses) on investments	5		7	7,997				
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	Ì							
	33, column (B))	10		4,48	9,751				
Part	XII Financial Statements and Reporting								
	Check if Schedule O contains a response to any question in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olaın ı	n						
	Schedule O.		l						
2a									
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oled o	r						
	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 audite	d on	a						
	separate basis, consolidated basis, or both:								
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersigh	ıt						
	of the audit, review, or compilation of its financial statements and selection of an independent accou			~					
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ı	n 🗀						
	Schedule O.								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth II	n						
	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 unde	rgo th	е 🗀						
ŕ	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b						
			For	m 990	(2012)				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 **2012**

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

Open to Public

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Internal Revenue Service Inspection **Employer identification number** Name of the organization 74-1193439 **United Way for Greater Austin** 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). 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **d** Type III-Non-functionally integrated **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting 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 Yes No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (ii) FIN (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the support? US? (see instructions)) Yes Yes Yes (A) (B) (C) (D) (E)

Total

Schedule A (Form 990 or 990-EZ) 2012 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

Calen	dar 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	(a) 2000	(b) 2003	(0) 2010	(a) 2011	(0) 2012	(i) Total
	include any "unusual grants.")	15.921.015	14.736.208	16.577.113	15.043.537	15.549.106	77.826.979
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	15.921.015	14.736.208	16.577.113	15.043.537	15.549.106	77.826.979
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.						77.826.979
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	15.921.015	14.736.208	16.577.113	15.043.537	15.549.106	77.826.979
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	101.475	58.955	214.903	15.028	57,456	447.81 7
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)			49.274	42.619	25.103	116.996
11	Total support. Add lines 7 through 10						78.391.792
12	Gross receipts from related activities, etc					12	1.219.451
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>	• • • •	· · · · · ·	<u>· · ▶ ∐</u>
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2012 (line					14	99.28 %
15 16a	Public support percentage from 2011 Sci 331/3% support test—2012. If the organi- box and stop here. The organization qua	zation did not	check the box	on line 13, and	d line 14 is 331		
b	331/3% support test—2011. If the organ check this box and stop here. The organ	nization did no	t check a box	on line 13 or	16a, and line		or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization".	ets the "facts-	and-circumsta	nces" test, che	eck this box ar	id stop here. E	xplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizar Explain in Part IV how the organization m supported organization	tion meets the neets the "facts	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	ns box and sto	p here.
18	Private foundation. If the organization di	id not check a	box on line 13			k this box and	

17

Cabadul	e A (Form 990 or 990-EZ) 2012						Page \$
Part	Support Schedule for Organiza						
	(Complete only if you checked the lf the organization fails to qualify						er Part II.
	on A. Public Support						
	dar 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						
2	received. (Do not include any "unusual grants.") 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 7a	Total. Add lines 1 through 5						
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						
8 8	Add lines 7a and 7b					17-11-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С 11	Add lines 10a and 10b 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, check this box and stop her	е	<u></u>			ear as a sectio	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8		-	• • • •			%
16 Secti	Public support percentage from 2011 Sch			<u> </u>	<u> </u>	16	%

331/3% support tests-2012. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization b 331/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and

line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) .

Investment income percentage from 2011 Schedule A, Part III, line 17

18

%

Pag	e	4

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).
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

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	Name o	f the organization		Employer identification number
Port Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate agrains 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 inform all grantees, donors, and donor advisors in writing that the assets held in donor advised only for chartable purposes and not for the benefit of the donor or donor advisors in varying that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 1 Purpose(s) of conservation easements held by the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements to a conservation easement on the last day of the tax year. 2 Preservation of an historically important land area easement on the last day of the tax year. 3 Total number of conservation easements. 4 Total number of conservation easements. 5 Total acreage restricted by conservation easements. 5 Total acreage restricted by conservation easements. 6 Number of conservation easements in didded in (c) acquired after \$17706, and not on a historic structure listed in the National Register 7 Number of conservation easements measurements on a certified historic structure included in (a). 2 2 do Number of conservation easements in the didded in (c) acquired after \$17706, and not on a historic structure listed in the National Register 5 Numbe	United	Way for Greater Austin		74-1193439
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Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	Par	<u> </u>		Other Similar Assets
 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: Revenues included in Form 990, Part VIII, line 1 S If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 S 	I GI			Other Chillian Account.
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	10			revenue statement and halance sheet
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	Ia			
 b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part VIII, line 1 (iiii) Assets included in Form 990, Part VIII, line 1 (iiiii) Assets included in Form 990, Part VIII, line 1 (iiiii) Assets included in Form 990, Part VIII, line 1 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii				
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	h			
public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1				
 (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				
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1	2			
a Revenues included in Form 990, Part VIII, line 1	-			
b Acces included in Form 000 Part V	•	_		
O ASSEIS INCHORUM FORM MAU FAM A				> \$

Part	III Organizations Maintaining	Collections of	Art, Historical 1	Treasures	, or Ot	her Similar As	sets (c	ontini	ued)
3	Using the organization's acquisition, collection items (check all that apply):		her records, chec	k any of th	e follov	ving that are a s	significar	t use	of its
а	☐ Public exhibition		d 🗌 Loan	or exchang	ge prog	rams			
b	Scholarly research		e 🗌 Othe	r					
_	Preservation for future generations								_
4	Provide a description of the organiza	tion's collections a	ind explain how t	hey further	the org	janization's exer	npt purp	ose ir	n Par
_	XIII.			h					
5	During the year, did the organization assets to be sold to raise funds rather							,	7 Na
Part									
rait	line 9, or reported an amour			janization	answe	rea res tort	יווון פפר	, ran	ιιν,
1a	Is the organization an agent, trustee	custodian or oth	er intermediary for	or contribut	ions or	other assets no	ot .		
	included on Form 990, Part X?							es [٦ No
ь	If "Yes," explain the arrangement in P						ъ.	-	
_	ii 100, Oxpiaii iiio airailgeiiioii(iii)	art rain and comple	no mo ronoming a			A	mount		
С	Beginning balance				10				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amou	nt on Form 990, Pa	art X, line 21? .				□ Y	es 🗌] No
	If "Yes," explain the arrangement in P								
Par	V Endowment Funds. Compl								
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three years bac	+		
1a	Beginning of year balance	666,009	603,583		67,959	530,81	0	49	96,630
b	Contributions						+		
С	Net investment earnings, gains, and								
ف ا	losses	52,241	62,426		35,624	37,14	9	3	34,180
d	Grants or scholarships Other expenditures for facilities and				1		+		
•	programs								
f	Administrative expenses					· - · · · · · · · · · · · · · · · · · ·			
g g	End of year balance	718,250	666,009		03,583	567,95	9	51	30,810
2	Provide the estimated percentage of the						<u> </u>		30,010
a	Board designated or quasi-endowme			,,	,,				
b	Permanent endowment ▶	69 %	· -						
С	Temporarily restricted endowment ▶								
	The percentages in lines 2a, 2b, and 2		0%.						
3a	Are there endowment funds not in th	e possession of th	e organization tha	at are held	and ad	ministered for th	ie		
	organization by:							Yes	No
	(i) unrelated organizations						3a(i)		~
	(ii) related organizations						3a(ii)		~
b	If "Yes" to 3a(II), are the related organ						3b		<u> </u>
4	Describe in Part XIII the intended uses								
Part					7->		(-D. D-		
	Description of property	(a) Cost or oth		or other basis ther)		Accumulated epreciation	(a) Bo	ok value	е
	Land			109 920					10 020
1a h	Buildings			108,820 2,240,105		1,517,775			08,820
b	Leasehold improvements			Z,Z-0, 103		1,517,775			22,330
d	Equipment			1,193,936		1,174,695			19,241
e	Other			.,,		.,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			. 1
	Add lines 1a through 1e. (Column (d) r	nust equal Form 99	90, Part X. column	(B), line 10)(c).) .	•		8!	50,391
							dule D (Fo		

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	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)				
(C)		·		<u>.</u>
(D)				
(E)				
(F) (G)				
(H)	•••••			
(I)				
	(b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Relate	d. See Form 990. Part X.	line 13.	
T CITE VIII	(a) Description of investment type	(b) Book value	(c) Method of valuation	on .
	(-,	''	Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)		<u> </u>		·····
(9)				
(10)	n (b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets. See Form 990, Pa	art Y line 15	<u> </u>	·
rartix		a) Description		(b) Book value
(1)		,		.,,
(2)			-	
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	umn (b) must equal Form 990, Part X, o	ol (R) line 15 \		
Part X	Other Liabilities. See Form 990		· · · · · · · · · · · · · · · · · · ·	
1.	(a) Description of liability	(b) Book value		
	Il income taxes		-	
	nations due to others	1,508,948	1	
(3)		<u> </u>	1	
(4)		-	1	
(5)			1	
(6)				
(7)				
(8)			ļ	
(9)		<u></u>	_	
(10)		·	1	
(11)	4) 45 000 5 (4) 551 5		1	
	(b) must equal Form 990, Part X, col. (B) line 25)	1,508,948		
	SC 740) Footnote. In Part XIII, provide the incertain tax positions under FIN 48 (ASC			
naunity for t	incertain tax positions under FIN 46 (ASC	raoj. Oneck here ii the text of	the roothote has been provided in Part	^III · · · · [_]

Schedu	e D (Form 990) 2012				Page 4
Parl	XI Reconciliation of Revenue per Audited Financial Statem	ents '	With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements			1	8,095,809
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	77,997		
b	Donated services and use of facilities	2b]	
c	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII.)	2d		1 1	
e	Add lines 2a through 2d			2e	77,997
3	Subtract line 2e from line 1			3	8,017,812
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	8,717,221		
С	Add lines 4a and 4b			4c	8,717,221
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	16,735,033
Part	XII Reconciliation of Expenses per Audited Financial States	nents	With Expenses pe	r Return	
1	Total expenses and losses per audited financial statements			1	5,333,666
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1	
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d][
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	5,333,666
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				•
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	8,717,221		
c	Add lines 4a and 4b			4c	8,717,221
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, III	ie 18.)		5	14,050,887
Part	XIII Supplemental Information				
Part V		o. Also	complete this part to	provide a	ny additional
Part \	, Line 4 - The endowment consists solely of donor-restricted funds, which are	restric	ted for the purpose of	furthering	United Way's
missi	on.				
	l, Line 4b - Other and Part XII, Line 4b - Other nts designated by contributors for specific organizations.	\$8,717			

SCHEDULEI (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.

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

2012

Department of the Treasury Internal Revenue Service

Name of the organization

74-1193439 Inited Way for Greater Austin
Part I General Information on Grants and Assistance

✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance?

2 □

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. Part II

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) Communities in Schools -							
3000 S. IH-35, Austin, TX 78704	74-2369020	501 (c) (3)	25.000	•			Program Grant
(2) Avance-Austin - 4818 E Ben							
White Blvd Ste 205 Austin. TX 78741	74-1969114	501 (c) (3)	25.000	ф			Program Grant
(3) Comm. Advancement Network -							
906 W. Milton, Austin, TX 78704	74-1547909	501 (c) (3)	10.000	-			Program Grant
(4) BC/BS - 9020 N. Capital of TX							
Austin, TX 78759	36-1236610	501 (c) (3)	100,000	-O-			Program Grant
.(5) Foundation Communities, Inc	0306330 71	(6) (7) 103		¢			Program Grant
(6) TX AFL-CIO (Union Relief Fd)	7076962-47	1000	000.61				
1106 Lavaca, Austin, TX 78701	74-1289747	501 (c) (3)	7,465	÷			Program Grant
(7) Bastrop Co Emergency 806 Fayette St., Bastrop, TX 78602	74-2520310	501 (c) (3)	5,000	0-			Program Grant
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and governmer	501(c)(3) and governmer	vernment organizat	nt organizations listed in the line 1 table	ine 1 table			7

3 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 I (Fo	Schedule I (Form 990) (2012)					Page 2
Part III	Grants and Other Assistance to Individuals Part III can be duplicated if additional space is		nited States. Com	plete if the organiz	ation answered "Yes" to	in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 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
-						
2						
ဗ						
4						
2						
9						
7						
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.	te this part to prov	vide the information	n required in Part I,	line 2, Part III, column (b)	, and any other additional
Schedule !	Schedule I, Part I, Line 2 -					
Once a gra	Once a grant is awarded, recipient organizations submit progress reports showing data related to goals being met.	progress reports sho	owing data related to	goals being met.		
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				
						Schedule I (Form 990) (2012)

SCHEDULE M (Form 990)

Noncash Contributions

2

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Open To Public Inspection

Employer identification number **United Way for Greater Austin** 74-1193439 Part I Types of Property (c) (b) (d) (a) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art 2 Art-Historical treasures . . . 3 Art - Fractional interests . Books and publications . 4 5 Clothing and household goods ß Cars and other vehicles . 7 Boats and planes 8 Intellectual property 9 Securities-Publicly traded . . 10 Securities-Closely held stock . Securities-Partnership, LLC, 11 or trust interests Securities-Miscellaneous . . 12 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution-Other . . . Real estate-Residential . . 15 16 Real estate—Commercial Real estate-Other 17 Collectibles 18 1,980 cost 19 • 3 Contributions Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . . 23 Scientific specimens . . Archeological artifacts . . 24 Other ▶ (paid advertising) 7 Contributions 25 89,841 published fee schedule Other ► (equipment) 26 ~ 2 Contributions 881 cost Other ► (miscellaneous) 27 ~ 3 Contributions 5,125 cost 28 Other ► (Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization Employer identification number **United Way for Greater Austin** 74-1193439 Form 990, Part III, Line 1 - Description of Organization Mission: UWATX collaborates with hundreds of local nonprofit organizations, corporate and public sector partners to provide financial, volunteer and advocacy support for the community. It convenes community leaders from across all sectors to identify and implement strategies to address today's pressing social challenges in the issue areas of education, health and financial stability. UWATX is responsible for the strategic stewardship and investment of millions of dollars in the community. Form 990, Part III, Line 4a - SB6 Program Services - SB6 developed a new community intervention called Play to Learn which combines parent education, early education, and technology to support low-income families with young children. Over 200 families were served in the pilot project and an evaluation plan was designed and implemented by the University of Texas. - Over 8,000 families benefitted from SB6 programming during the year. A range of services were provided ranging from home visiting, high quality early education in child care settings, evidence-based parent education classes, mental health services, and book distributions. - Thirty Americorp VISTA volunteers were trained, supported, and deployed in a range of early childhood settings over the summer of 2013. The volunteer developed children's storytimes for underserved libraries in East Austin, provided math coaching in child care centers, and helped the City with early childhood planning activities. Form 990, Part III, Line 4b - Financial Opportunity Program Services -- United Way continued the training seminar, now called the Financial Empowerment Boot Camp, to teach over 40 case managers and social service workers how to integrate financial education into their client services. Form 990, Part III, Line 4d -Navigation Center Program Services **Education focus area: Navigation Center** Expenses: \$2,595,436 Grants: -0-Revenue: The United Way Navigation Center helps meet the needs of the community by offering callers one-call access to health care and various human services, such as finding rent assistance, employment assistance, food, child care, disaster response, and State of Texas benefits. The United Way Navigation Center partners with 2-1-1 Texas through the Texas Health and Human Services Commission to help individuals

navigate more than 60,000 services statewide.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization United Way for Greater Austin	Employer identification number 74-1193439
Progress in 2012-13 -	747130403
- Answered more than 342,000 calls from a 10-county service area, with the largest number of calls from	Travis County and the greater
Austin area (more than 40%). Additionally, more than 1,000 follow-up calls were made to previous callers	to monitor customer service,
quality of information given, and if needs were met.	
- Provided referrals to a growing number of community-wide initiatives. These include community tax ce	nters for free tax preparation
services, summer food service programs that provide lunch to children in need, and back-to-school immu	inization programs.
- Program quality indicators are monitored regularly, and the Navigation Center achieved a 98% custome	r satisfaction score, with 97% of
callers stating they would call again with future needs.	
- Answered it's 2 millionth call in 2012. It took 7 years to reach 1 million calls and only 3 years to reach 2	million calls.
Form 990, Part III, Line 4d -Other amounts designated by contributors for specific organizations -	
Expenses: \$8,725,455 Grants: \$8,725,455 Revenue: -0-	
Form 990, Part VI, Section B, Line 11b - There is a review and approval of the Form 990 by the Finance Co	mmittee. The Form 990 is then
provided to the full Board of Directors prior to filing.	
Form 990, Part VI, Section B, Line 12c - A questionnaire is circulated to the Board of Directors, Officers an	d Key Employees annually to
determine whether there are any conflicts of interest.	
Form 990, Part VI, Section B, Line 15a - The Board Chair conducts an annual performance review for the P	resident and reviews the
President's performance with the full Board. Compensation is researched and benchmarked annually; an	y pay changes are approved by
the Board Chair.	
Form 990, Part VI, Section C, Line 19 - The organization makes all documents available upon request. The	annual audit is posted on the
UWATX website.	

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Reven	ue Service				l		
	e filing for an Automatic 3-Month Extension, o						🕨 🗹
• If you are	e filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only	Part II (on page 2 of	this	form).	
Do not co	mplete Part II unless you have already been g	granted an	automatic 3-month ex	rtension on a previou	usly f	led Form	າ 8868.
a corporat 8868 to re Return for	c filing (e-file). You can electronically file Form alon required to file Form 990-T), or an addition equest an extension of time to file any of the form Transfers Associated With Certain Personals). For more details on the electronic filing of the	al (not auto forms listed I Benefit C	omatic) 3-month exter d in Part I or Part II w Contracts, which mus	nsion of time. You ca vith the exception o at be sent to the IF	an ele f Fori RS in	ectronica m 8870, i paper i	lly file Form Information format (see
Part I	Automatic 3-Month Extension of Time	. Only sul	omit original (no cor	oies needed).			
A corpora Part I only	tion required to file Form 990-T and reque	sting an a	utomatic 6-month ex	xtension—check thi			▶ 🗆
	orporations (including 1120-C filers), partnersh	ıps, REMIC	Cs, and trusts must us	se Form 7004 to req	uest a	an exten	sion of time
to file inco	me tax returns.						
				Enter filer's identifyin	-		
Type or Name of exempt organization or other filer, see instructions.						per (EIIN) o	r
print File by the United Way for Greater Austin Number, street, and room or suite no If a P.O. box, see instructions Social security number (SSN)					1934	39	
)		
due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
return See							
instructions	Austin, TX 78702						
Enter the F	Return code for the return that this application i	s for (file a	separate application t	for each return) .			. 0 1
Applicati	on .	Return	Application	·			Return
Is For		Code	Is For				Code
Form 990	or Form 990-EZ	01	Form 990-T (corpora	ation)		-	07
Form 990)-BL	02	Form 1041-A				08
Form 472	20 (ındividual)	03	Form 4720				09
Form 990-PF 04 Form 5227 10						10	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11						11	
Form 990	0-T (trust other than above)	06	Form 8870				12
• The boo	ks are in the care of ▶ Debbie Bresette. Preside	ent	••••				
Telepho	ne No. ► 512-472-6267	F	AX No. ►			_	
	ganization does not have an office or place of b						▶□
	for a Group Return, enter the organization's fou	_		· · · —		If th	
	ole group, check this box ▶ □ . If	-	t of the group, check t	this box	▶ [and at	tach
	the names and EINs of all members the extens						
	equest an automatic 3-month (6 months for a co	•	•	•		The	
	til <u>February 15</u> , 20 14, to file the exer the organization's return for:	mpt organi.	zation return for the or	rganization named a	bove.	. The exte	ension is
	calendar year 20 or						
	oi						
▶ [☑ tax year beginning July 1	20	12 , and ending	luna 20		, 20	42
	he tax year entered in line 1 is for less than 12 r						13
_	Change in accounting period	,					
	his application is for Form 990-BL, 990-PF, 99	0-T, 4720,	or 6069, enter the ten	tative tax, less any	-		
noi	nrefundable credits. See instructions.				3a	\$	
b If t	this application is for Form 990-PF, 990-T,	4720, or 6	069, enter any refun	idable credits and			
est	timated tax payments made. Include any prior y	ear overpa	yment allowed as a ci	redit.	3b	\$	
	lance due. Subtract line 3b from line 3a. Includ			required, by using			
	TPS (Electronic Federal Tax Payment System).					\$	
Caution if	you are doing to make an electronic fund withdrawal	with this Fo	rm 8868 see Form 8453	LEO and Form 8870-E	O for	naumant ii	netructions