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# ∳orm **990**

OMB No 1545-0047 2013

Open to Public Inspection

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Α.	ror me	ZUIS Calend	ial year, or lax year beginn	iriy	, 2013, a	ina enamy		•		
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_				IN 47404-517			Phone no	(812	339-049	50
Ма	y the IR	S discuss th	nis return with the preparer	shown above? (see i	nstructions)				X Yes	No
BA	A For P	aperwork R	eduction Act Notice, see th	ne separate instructio	ns.	TEEA	0113L 11/08/13		Form <b>99</b>	0 (2013)

Form 990 (2013) United Way of M	onroe County, Inc.	35-0985959	Page <b>2</b>
Part III Statement of Program S	•		
	response or note to any line in this Part III		
Briefly describe the organization's miss  United Way improves per	sion ople's lives by addressing critical n	eeds today and wor	kina
	omorrow. Funds are raised from a bro		
granted to tax exempt a		==-== <del>=====</del>	
, ,	nificant program services during the year which were not lis	sted on the prior	
Form 990 or 990-EZ?		Yes	X No
If 'Yes,' describe these new services o		,	
3 Did the organization cease conducting If 'Yes,' describe these changes on Sc	, or make significant changes in how it conducts, any progra hedule O	am services? Yes	X No
Section 501(c)(3) and 501(c)(4) organia	ervice accomplishments for each of its three largest program zations and section 4947(a)(1) trusts are required to report le, if any, for each program service reported	n services, as measured by exthe amount of grants and alloc	xpenses. cations to
4 a (Code) (Expenses \$	1,235,557. including grants of \$	) (Revenue \$	)
	unty works with member agencies and a		
	rovide comprehensive and collaborative		
	their lives. The organization focus		
	tion, Earnings & Essentials - to crea		
	ssues in our community. Priorities an	<u>d_results_are_con</u>	tained_
<u>in Schedule O.</u>			
4b (Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
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		<del>-</del>	
4c (Code ) (Expenses \$	including grants of \$	) (Revenue \$	
	moduling grants or $\phi$		<del></del> '
4 d Other program services. (Describe in S	Schedule () )		···
(Expenses \$	including grants of \$ ) (Rever	nue \$	)
4 e Total program service expenses ►	1,235,557.		
ВАА	TEEA0102L 07/02/13	Forn	n <b>990</b> (2013)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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.			
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŀ	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	11 b		X
•	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	11 c		Х
	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	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	11 f	Х	
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	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	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	144	-	
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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		Х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a <sup>2</sup> If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	-	X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	1	Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	

<u> </u>	The state of the s		Yes	No
			163	110
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or 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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	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		Х
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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
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		Х
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	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
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? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
1	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Forn	1 <b>990</b> (	(2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 11 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners? 1 c 2 a 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 12 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Χ 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account) 4 a **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. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Organizations that may receive deductible contributions under section 170(c). 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? 7 a Χ b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c Form 8282 d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f q If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h 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. a Did the organization make any taxable distributions under section 4966? 9 a b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Section 501(c)(7) organizations. Enter 10 a 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 10 b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11 b 12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a 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 13b which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13 c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14 a X b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 14b

Form, 990 (2013) United Way of Monroe County, Inc. 35-0985959 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 9 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 8 X **b** Each committee with authority to act on behalf of the governing body? 8 b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Nο 10 a Did the organization have local chapters, branches, or affiliates? 10 a 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? 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule 0 X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O X Schedule O how this was done 12 c X 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official 15 a X **b** Other officers of key employees of the organization See Schedule 0 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year? 16 a 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > IN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule 0 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a 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 organization	n nor any i	related	dorg	janiz	atio	n com	npen	sated any current offi	cer, director, or truste	ee.
				(C	;)					
(A) Name and Title	(B) Average hours per	one bo	er an	less p	erso	more to n is both or/trustee	han	(D) Reportable compensation from the organization	(E)  Reportable  compensation from  related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Dave Conner	2									
Director	0	X	<u> </u>					0.	0.	0.
(2) Lisa Abbott	2									
Secretary	0	X		X				0.	0.	0.
(3) Heidi Schulz	2									
President	0	X		X				0.	0.	0.
(4) Mark Franklin	2									
Past President	0	X						0.	0.	0.
(5) Forrest Gilmore	2	1						<u> </u>		
Director	0	X						0.	0.	0.
(6) Kevin Osborne	2	1								
Vice President	0	X		Х				0.	0.	0.
(7) Steve Deckard	2					İ				
Director	0	X		<u> </u>				0.	0.	0.
(8) Debbie Landrum	22_			}						
Director	0	X						0.	0.	0.
(9) Kyle Parker	2	1							İ	•
Treasurer	0	X		X	<u> </u>			0.	0.	0.
(10) Barry D. Lessow	50									
Executive Direc	0			X				61,039.	0.	0.
(11)										
(12)	<del> </del>	<del> </del>			_					
(13)										
(14)										

11 art vii   Section A. Officers, Directors, Th	(B)		H-11	((	>)	.03,	un	a riigilest ooi	npensateu Liir	inproyees (conti		
(A) Name and title	Average hours per week	box	, unle	heck ss pe	erson	than is both or/trus	n an tee)	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from	(F Estim amount	ated of other	
	(list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/I 099-MISC)	related organizations (W-2/1099-MISC)	comper from organi and re organiz	the zation elated	
(15)									***		-	
(16)												
(17)											. •	
(18)												
(19)											<del></del>	
(20)									181_			
(21)												
(22)		<u> </u>										
(23)												
(24)											_	
(25)		-										
1 b Sub-total			Ш		L	l	<b>&gt;</b>	61,039.	0.		0.	
c Total from continuation sheets to Part VII, Sectio	n A						<b>&gt;</b>	0.	0.		0.	
d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limit	ted to the	se lis	sted	abo	ve)	who	rece	61,039. eived more than \$	0. 100,000 of reportab	le comper	0. Isation	
from the organization ► 0									<del></del>	Y	es No	
3 Did the organization list any former officer, direct on line 1a <sup>3</sup> If 'Yes,' complete Schedule J for such	or, or trus	stee, a/	key	emį	ploy	ee, o	r hi	ghest compensate	ed employee	3	Х	
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportabl r than \$1	e cor 50,00	nper 10? /	nsat 'f 'Y	ion a	and c	the <i>lete</i>	r compensation fr Schedule J for	om		.,	
<ul> <li>5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes</li> </ul>	compen	satioi	າ fro	m a	iny (	unrela	atec	l organization or ii	ndıvıdual	5	X X	
Section B. Independent Contractors	<u>i</u>						-		-		Λ	
Complete this table for your five highest compensation from the organization Report compensation.	sated inde pensation	pend for t	lent he c	con aler	trac ndar	tors t year	hat en	received more the ding with or within	an \$100,000 of the organization's	tax year		
(A) Name and business addi	ress							(B) Description (	of services	(C) Compens	ation	
										-		
							_				-	
Total number of independent contractors (including \$100,000 of compensation from the organization)	•	limit	ed t	o th	ose	listed	d ab	ove) who receive	d more than	······································	<del></del>	
RAA	U	TEFA	1100	11/	11/12					Form 99	0 (2012)	

	Check if Schedule O contains a response or note to any	line in this Part VIII			
		(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns1 a26,640.b Membership dues1 bc Fundraising events1 c				
NS, GIFT? Similar <i>a</i>	d Related organizations  e Government grants (contributions)  1 d  25,113.				
TRIBUTIO OTHER	f All other contributions, gifts, grants, and similar amounts not included above  1 f 1,519,864.  g Noncash contributions included in lines 1a-1f \$ 24,124.				
UE CON	h Total. Add lines 1a-1f  Business Code	1,571,617.			
VICE REVEI	b CFC Campaign fees	10,403. 3,404.	10,403. 3,404.		
PROGRAM SERVICE REVENUE	d e f All other program service revenue g Total. Add lines 2a-2f	12 007			
_ <b></b> _	3 Investment income (including dividends, interest and other similar amounts)	13,807.			268.
	4 Income from investment of tax-exempt bond proceeds . ►  5 Royalties				
:	6 a Gross rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory.  (i) Securities (ii) Other 24, 124.				
	b Less cost or other basis and sales expenses  c Gain or (loss)  d Net gain or (loss)				
OTHER REVENUE	8 a Gross income from fundraising events (not including . \$ of contributions reported on line 1c)				
OTHER	See Part IV, line 18  b Less direct expenses  c Net income or (loss) from fundraising events			····	
	9 a Gross income from gaming activities See Part IV, line 19  b Less. direct expenses  b				_
	c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns			·····	
	and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code  11 a Miscellaneous	30.			30.
	b c d All other revenue				
	e Total. Add lines 11a-11d  Total revenue. See instructions	30. 1,585,722.	13,807.	0.	298.

### 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 re	<u> </u>			
	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	811,188.	811,188.		
2	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	65,000.	39,000.	13,000.	13,000.
•	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	332,485.	229,870.	36,512.	66,103.
8	Pension plan accruals and contributions	332, 1331	223/0,01	30/0121	00,100.
J	(include section 401(k) and 403(b) employer contributions)	32,858.	22,226.	4,093.	6,539.
9	Other employee benefits	72,291.	48,899.	9,005.	14,387.
10	Payroll taxes	30,045.	20,324.	3,742.	5,979.
11	Fees for services (non-employees)				
а	Management				
b	Legal	518.		518.	-
	Accounting	21,748.	1,189.	20,559.	·
d	Lobbying	22,7101	1,2031	20,0031	
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion	6,043.	:	6,043.	
	Office expenses		1		<u></u>
	Information technology	3,829.	2,872.	574.	383.
	Royalties	0,023.	2,0121	0,11	
	Occupancy	40,068.	30,051.	6,010.	4,007.
	Travel	4,798.	3,598.	720.	480.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,730.	3,330.	720.	400.
19	Conferences, conventions, and meetings	226.	113.	113.	
	Interest				
21	Payments to affiliates	13,272.	6,636.	3,318.	3,318.
22	Depreciation, depletion, and amortization	2,238.	895.	448.	895.
23	Insurance	2,987.	2,240.	448.	299.
	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)	, i			
а	Campaign Costs	65,393.	1,004.		64,389.
	Miscellaneous	11,048.	2,466.	6,209.	2,373.
	Equipment expense	9,100.	6,825.	1,365.	910.
	Supplies	6,008.	3,605.	1,202.	1,201.
	All other expenses	7,268.	2,556.	3,714.	998.
25	Total functional expenses. Add lines 1 through 24e	1,538,411.	1,235,557.	117,593.	185,261.
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				
	SOP 98-2 (ASC 958-720)	<u> </u>		<u> </u>	Form <b>990</b> (2013)

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 321,583. Cash - non-interest-bearing 351,860 Savings and temporary cash investments 267,813 2 383,548. 2 Pledges and grants receivable, net 3 3 788,866. 747,948. 4 Accounts receivable, net 7,480. 7,115. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 5,234 9 5,466. 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule  $\ensuremath{\mathsf{D}}$ 10 a 23,444. **b** Less accumulated depreciation 10 b 19,039 4,795. 100 4,405. Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 14 Other assets See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 1,426,048. 16 16 1,470,065. 17 Accounts payable and accrued expenses  $7,\overline{434}$ . 17 13,076. 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 39,668 40,878 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 I E S Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 253,598 263,733. 26 Total liabilities. Add lines 17 through 25 300,700. 26 317,687. Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 268,041. 27 331,347. 28 Temporarily restricted net assets 857,307. 28 821,031. Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31

BAA

32

33

34

1,470,065. Form **990** (2013)

1,152,378.

32

33

34

1,125,348

1,426,048.

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Part XI Reconciliation of Net Assets  Check if Schedule O contains a response or note to any line in this Part XI			
Check if Schodulo O contains a response or note to any line in this Part XI			
			X
1 Total revenue (must equal Part VIII, column (A), line 12)	1,58	35,7	22.
Total expenses (must equal Part IX, column (A), line 25)	1,53	38,4	11.
3 Revenue less expenses Subtract line 2 from line 1		17,3	11.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  4	1,12	25 <u>, 3</u>	48.
5 Net unrealized gains (losses) on investments 5			
6 Donated services and use of facilities 6			
7 Investment expenses 7			
8 Prior period adjustments			
9 Other changes in net assets or fund balances (explain in Schedule O) See Schedule 0	-2	20,2	81.
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	1,15	52,3	78.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII			
		Yes	No
1 Accounting method used to prepare the Form 990 <sup>-</sup> Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a	Х	
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:			
X Separate basis Consolidated basis Both consolidated and separate basis			
<b>b</b> Were the organization's financial statements audited by an independent accountant?	2 b	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	,		1
X Separate basis Consolidated basis Both consolidated and separate basis			i
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3 a 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?	3 a		Х
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		
BAA	Form	990 (	2013)

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

Total

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization United Way of Monroe County, Inc. 35-0985959 Part | Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(bX1)(AXV). 6 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\(\chi\)1\(\chi\)A\(\chi\)vi). (Complete Part II) 7 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See **section 509(a)(2).** (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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. 11 Type III - Functionally integrated d Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization? A family member of a person described in (i) above? 11 q (ii) (III) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s). h (VII) Amount of monetary (ii) EIN (iv) Is the (v) Did you notify (vi) Is the (I) Name of supported (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) organization in column (i) listed in your governing document? the organization in column (i) of your support? organization in column (i) organized in the US? organization support Yes No Yes No Yes Nο (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2013

### 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)

<u>Sec</u>	tion A. Public Support						
Cale begii	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants )	3,295,135.	2,317,012.	1,520,385.	1,408,816.	1,571,617.	10,112,965.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	3,295,135.	2,317,012.	1,520,385.	1,408,816.	1,571,617.	0.
6	Public support. Subtract line 5 from line 4						10,112,965.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	( <b>d)</b> 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4	3,295,135.	2,317,012.	1,520,385.	1,408,816.	1,571,617.	10,112,965.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,156.	1,879.	821.	352.	268.	5,476.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		•				0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV	35,053.	14,358.	22,586.	19,737.	13,867.	105,601.
11	<b>Total support.</b> Add lines 7 through 10						10,224,042.
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	0.
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	tion's first, second	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶ 📋
Sec	tion C. Computation of Pu	ıblic Support I	Percentage				
	Public support percentage for 20 Public support percentage from 2	•	• •	e 11, column (f))		14 15	98.91 <b>%</b> 98.67 %
	33-1/3% support test — 2013. If and stop here. The organization	the organization d	id not check the b	oox on line 13, and ganization	d the line 14 is 33		
k	33-1/3% support test — 2012. If the and stop here. The organization	ne organization di	d not check a box	on line 13 or 16a	i, and line 15 is 33	3-1/3% or more, ch	
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this l	box and stop here	. Explain in Part l	V how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est The organiza	test, check this lation qualifies as a	box and <b>stop here</b> publicly supporte	. Explain in Part l' d organization	V how the ►
18 RAA	Private foundation. If the organiz	zation did not ched	ck a box on line 1:	3, 16a, 16b, 17a,	or 17b, check this	box and see instr	ructions

Schedule A (Form 990 or 990-EZ)	2013 United W	ay of Monro	e County, 1	Inc.	35-0985959	Page 3
Part III Support Schedul	e for Organizatio	ns Described i	n Section 509	9(a)(2)		
(Complete only if you	checked the box on lir	ne 9 of Part I or if	the organization f	failed to qualify un	der Part II If the org	janization fails
to qualify under the te		e complete Part II	.)			
Section A. Public Support		<b>4-&gt; 2010</b>	<b>(c)</b> 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
Calendar year (or fiscal yr beginning in)  1 Gifts, grants, contributions	<b>(a)</b> 2009	<b>(b)</b> 2010	(6) 2011	(a) 2012	(e) 2013	(i) rotai
and membership fees received (Do not include any 'unusual grants.')						
2 Gross receipts from admis-						
sions, merchandise sold or services performed, or facili furnished in any activity that related to the organization's tax-exempt purpose	is			:		
3 Gross receipts from activitie that are not an unrelated tra	ide					
or business under section 5 <b>4</b> Tax revenues levied for the	13		***	<del></del>		<del></del>
organization's benefit and either paid to or expended o its behalf	on					
5 The value of services or facilities furnished by a governmental unit to the						
organization without charge  6 Total. Add lines 1 through 5						
7 a Amounts included on lines 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other the disqualified persons that exceed the greater of \$5,00 1% of the amount on line 13 for the year	nan 0 or					
c Add lines 7a and 7b						
8 Public support (Subtract lu 7c from line 6)	ne					
Section B. Total Support	1 1 0000	4 > 0010	4-> 2011	(4) 2012	(2) 2012	(f) Total
Calendar year (or fiscal yr beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(I) Total
9 Amounts from line 6 10 a Gross income from interest dividends, payments receiv on securities loans, rents, royalties and income from similar sources	ed					
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 197	5					
c Add lines 10a and 10b						
11 Net income from unrelated busines activities not included in line 10b, whether or not the business is regularly carried on	is					
12 Other income Do not inclugain or loss from the sale capital assets (Explain in Part IV)	ide If					
13 Total Support. (Add Ins 9,10c, 11 a						
14 First five years. If the Form organization, check this bo	990 is for the organiz x and <b>stop here</b>	ation's first, secon	id, third, fourth, o	r fifth tax year as	a section 501(c)(3)	▶ □
Section C. Computation of	of Public Support	Percentage				
15 Public support percentage	for 2013 (line 8, colum	ın (f) dıvıded by lır	e 13, column (f))		15	<del></del>
16 Public support percentage					16	6
Section D. Computation of Investment income percent	tage for 2013 (line 10c	column (f) divide	<b>ge</b> d by line 13, colu	ımn (fi)	17	%
<ul><li>17 Investment income percent</li><li>18 Investment income percent</li></ul>				(17)	18	
10 - 22 1/29/ support tosts - 20	113 If the organization	did not check the	box on line 14, a	and line 15 is more	than 33-1/3%, and	
is not more than 33-1/3%,	check this box and <b>sto</b>	<b>op here.</b> The organ did not check a b	nization qualifies a ox on line 14 or li	as a publicly supp ine 19a. and line 1	orted organization .6 is more than 33-1/	3%, and
line 18 is not more than 33	-1/3%, check this box	and stop here. Th	e organization qu	ialifies as a public	ly supported organiz	ation •

Schedule	Α	(Form	990 (	or 99	0-EZ)	2013	3	Uni	ted	Way	7 of	Mo	nroe	Cou	ınty,	. In	c.		35-	-0985	959		Page 4
Part IV		Suppor 17 See	b; a inst	entand fruct	al In Part ions	forn    ,   ).	n <b>ati</b> ine	<b>on.</b> 12.	Prov Also	/ide con	the on the first the second se	expla te th	anatio is pai	ons r	equir	ed b addi	y Par tional	t II, Iin inforn	e 10; nation	Part I	l, line	17a	
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### SCHEDULE D (Form 990)

### Supplemental Financial Statements

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

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

United Way of Monroe County, Inc. 35-0985959 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes 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 Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year >\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ► Ś b Assets included in Form 990, Part X

Schedule <b>D</b> (Form 990) 2013 Unite	d Way of	Monroe Cour	ity, Ir	ıc.	35-098	5959 Page <b>2</b>
Part III Organizations Maintain	ing Collection	ns of Art, His	orical T	reasures, or Oth	ner Similar Assets (	continued)
3 Using the organization's acquisition items (check all that apply)	on, accession, a	and other records	, check ar	ny of the following t	that are a significant use	e of its collection
a Public exhibition		<b>⊢</b> –		change programs		
<b>b</b> Scholarly research		<b>e</b> [ ] C	ther			
c Preservation for future genera						
4 Provide a description of the organ Part XIII		•	•	-		ın
5 During the year, did the organizat to be sold to raise funds rather th	tion solicit or re an to be mainta	ceive donations o ained as part of th	if art, histo ne organiz	orical treasures, or ation's collection?	other similar assets	Yes No
Part IV Escrow and Custodia line 9, or reported an	l Arrangeme	ents. Complet	e if the	organization ar	nswered 'Yes' to Fo	orm 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian,	or other intermed	diary for co	ontributions or othe	er assets not included	X Yes No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII and	complete the fol	lowing tab	le	'	
See Part XIII						Amount
c Beginning balance					1 c	39,668.
d Additions during the year					1 d	88,586.
e Distributions during the year					1 e	87,376.
f Ending balance					1f	40,878.
2 a Did the organization include an ai	mount on Form	990, Part X, line	21?			X Yes No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII Ch	eck here if the ex	plantion h	as been provided i	ın Part XIII	$\overline{\mathbf{X}}$
		See Part				
Part V Endowment Funds. Co	mplete if the					
	(a) Current ye	ar <b>(b)</b> Pri	or year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance						<u> </u>
<b>b</b> Contributions						<del></del>
<ul> <li>c Net investment earnings, gains, and losses</li> </ul>						
<b>d</b> Grants or scholarships						
<ul> <li>Other expenditures for facilities and programs</li> </ul>						
f Administrative expenses		.,				
<b>g</b> End of year balance				<u> </u>		
<ol><li>Provide the estimated percentage</li></ol>		year end balance	e (line 1g,	column (a)) held a	is	
a Board designated or quasi-endov	vment 🟲	%				
<b>b</b> Permanent endowment ▶	% %					
c Temporarily restricted endowmer	nt ►	%				
The percentages in lines 2a, 2b,	and 2c should	equal 100%.				
3 a Are there endowment funds not a organization by:	n the possession	on of the organiza	ition that a	are held and admin	istered for the	Yes No
(i) unrelated organizations						3a(i)
(ii) related organizations						3a(ii)
<b>b</b> If 'Yes' to 3a(ii), are the related of	organizations lis	ted as required o	n Schedu	le R?		3b
4 Describe in Part XIII the intended	-	·				
Part VI Land, Buildings, and						
Complete if the organi			orm 99	0, Part IV, line	11a. See Form 990	, Part X, line 10.
Description of property	(	a) Cost or other b (Investment)	asıs (	<b>b)</b> Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land						
<b>b</b> Buildings						
c Leasehold improvements				403.	403.	0.
<b>d</b> Equipment						
e Other				23,041.	18,636.	4,405.
Total. Add lines 1a through 1e. (Colum	nn (d) must equ	al Form 990, Par	X, colum	n (B), line 10(c)	<b>•</b>	4,405.
BAA	<del></del>				Sched	dule <b>D</b> (Form 990) 2013

Part VII Investments – Other Securities.	'Voal to Farm 000	N/A	
Complete if the organization answered  (a) Description of security or category (including name of security)	(b) Book value		
(1) Financial derivatives	(b) book value	(c) Method of valuation Cost or end-of-year n	narket value
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12.)	<u> </u>	<u></u>	
Part VIII Investments - Program Related. Complete if the organization answered	'Yes' to Form 990	N/A Part IV line 11c See Form 990 Pa	rt X line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year	
(1)	(a) Book take	(c) modeled on valuation leads of one of year	in market value
(2)			
(3)			· · · · · · · · · · · · · · · · · · ·
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			<del></del>
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13 )			
Part IX Other Assets.	N/A		
Complete if the organization answered 'Y			
	scription	(k	) Book value
(1)			
(2)			
(3)		·	
(4) (5)			
(6)			·
(7)			
(8)			<u> </u>
(9)			
(10)			·
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15 )	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered 'Yes' to Form		11f. See Form 990, Part X, line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes	060 75		
(2) Designations Payable	263,73	33.	
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)	.	<del></del>	
(10)			
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25.)	<b>▶</b> 263,73	33.	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the for			for upportain

1 Total expenses and losses per audited financial statements			. 1	1,499,566
2 Amounts included on line 1 but not on Form 990, Part IX, line 25				
a Donated services and use of facilities	2 a	289,252.		
<b>b</b> Prior year adjustments	2 b			
c Other losses	2 c			
d Other (Describe in Part XIII) See Part XIII	2 d	6,137.	:	
e Add lines 2a through 2d			2 e	295,389
3 Subtract line 2e from line 1			3	1,204,177
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		.	
<b>b</b> Other (Describe in Part XIII ) See Part XIII	4 b	334,234.	.	
c Add lines 4a and 4b	-		4 c	334,234
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,538,411

Part XIII Supplemental Information.

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

Part IV, Line 1b - Contributions Or Other Assets Not Included on B/S
Organization manages area Combined Federal Campaign under contract from LFCC and
subject_to_Federal_Office_of_Personnel_ManagementFunds_do_not_belong_to
organization and are not combined with organization funds
Part IV, Line 2b - Explanation Of Escrow Account Liability
Escrow liability reported on balance sheet represents funds held by organization for
and under direction of other organizations. Funds are not segregated form
organization funds.
BAA Schedule <b>D</b> (Form 990) 2013

Schedule D (Form 990) 2013 United Way of Monroe County, Inc.	35-0985959	Page 5
Part XIII Supplemental Information (continued)		
Part X - FIN 48 Footnote		
The agency files Federal and Indiana income tax returns as an	exempt organization	1
under section 501(c)(3) of the Internal revenue Code and does	not report any	
unrelated business income or other income taxes. The agency is	s not considered to	be
a private foundation.		
The agency's Federal and Indiana income tax returns for 2009	and later are subjec	et
to examination by the IRS and state of Indiana, generally for	three years after t	hey
were filed. The agency recognizes tax benefits only to the ex	tent the agency	
believes it is "more likely than not" that its tax positions	would_be_sustained_u	ı <u>pon</u>
examination. There were no tax positions considered less than	50% likely of	
sustainability.		
There were no income tax penalties or interest incurred in 20	13_or_2012.	

# SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Attach to Form 990.

2013

OMB No 1545-0047

Open to Public Inspection

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

Employer identification number 35-0985959

United Way of Monroe County, Inc. Part | General Information on Grants and Assistance

See Part IV

**≗** □

X Yes

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?

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.

בסונו אאט, דמנוזי, ווופ בו זטו מוץ יפניטיפונ ניימנייפנ	טו מווא ובכוחובווו			מולה סמוה ביו משליו		osooo. oondo	
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) Abilities Unlimited Disabilit							General &
2620 N Walnut St, Ste 1205					-		People with
Bloomington. IN 47404	35-1708926 501 (c)	501 (c) (3)	9,252.	0			disabilities
							General &
       							dısaster &
Bloomington, IN 47408	35-0872348 501 (c)	501 (c) (3)	36, 952.	0			emergency
							General &
↓ 1 1					•		addıctıon
Bloomington, IN 47402	35-1499772 501 (c)	501 (c) (3)	24,062.	. 0			services
(4) Area 10 Agency on Aging							General &
l							elderly
Ellettsville, IN 47429	31-0955307 501 (c)	501 (c) (3)	40,852.	0			services
(5) Big Brothers Big Sisters of M							
PO Box 2534							General & youth
Bloomington, IN 47402	35-1330448 501 (c)	501 (c) (3)	38,257.	0.			services
(6) Boys& Girls Club of Bloomingt							,
PO Box 1716							General & youth
2	35-0997525 501 (c)	501 (c) (3)	40,098.	0.			
(7) Catholic Charities of Bloomin							General &
635 N College Ave							counseling &
Bloomington, IN 47404	35-0867980 501 (c)	501 (c) (3)	36,717.	0.			education
(8) Community Kitchen of Monroe C							,
917 S Rogers							General & food
	31-1101408 501 (c)	501 (c) (3)	49, 434.	0.			for low income
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	ganizations listed ir	the line 1 table			<b>A</b>	26

Schedule I (Form 990) (2013)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 3 Enter total number of other organizations listed in the line 1 table

Page 2

Schedule I (Form 990) (2013) United Way of Monroe County, Inc.

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
2					
u m					
4					
ស					
y					
7					
Part IV   Supplemental Information. Provide the information required in Part I, line	ide the information	on required in Part	2, Part III,	column (b), and any oth	other additional information.
Part I, Line 2 - Procedures for Monitoring Use of Grant	ring Use of Grant	ts Funds in U.S.			
United_Way_only_provides_Community_Action_F	mity_Action_E	und_allocation	und_allocation_grants_to_human_service	n service	
agencies_that_have_successfully_been_certif	ly been certif	<u>ied_by_our_board</u>	rd_as_meeting_standards_of	tandards of	
efficiencyeffectivenessand_governance.	l_governance	The amounts of these grants		are based on	
a separate_application_in_which_the_agency_		describes past	results and	anticipated	
outcomes Formal_re-certification_and_re-a	tion and re-a	llocation processes	esses_are_conducted	cted	
triennially_(and_alternate_so_agencies_part	agencies_part	icipate in one process	process every.	every 18 months)	
and_agencies_submit_financial,_administrati	_administrati	<u>ve, and progra</u>	<u>ve, and programmatic documentation</u>	<u>ation</u>	
annuallyWe_also_evaluate_the_outcomes_of	e outcomes of		any other projects (for example, those	<u>ple, those</u>	
funded_through_grants_we've_received)_via_p	ceived)_via_p	eriodic_reports	eriodic_reports, participation_in project	n in project	
meetings, and as appropriate, BAA	on-site visit	v.			Schedule I (Form 990) (2013)

Continuation Sheet for Schedule I (Form 990)

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Continuation Page 1

Schedule I Cont (Form 990) 2013 General & youth Shelter abused (h) Purpose of grant or assistance Homes for poor Winter shelter Legal service disadvantaged Child care & Gen support Support the Gen support Animal care education services disabled Food for for poor Employer identification number School women 35-0985959 Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (d) Amount of cash grant 39,243. 48,268. 18,532. 64,638. 7,694. 30,019 6,409. 11,489 5,580 TEEA4001L 07/12/13 (c) IRC section if applicable 35-21281<u>59|501 (c) (3)</u> 54-0962<u>978|501 (c) (3)</u> 35-6059654 501 (c) (3) (3) 35-6064277|501 (c) (3) 35-1313090 501 (c) (3) (3) 3 (c) (3) 23-7300355 501 (c) (3) (၁) (၁) ত্র 23-7159426 501 35-1753977 501 31-1051402 501 35-1550876 501 (S) EIN United Way of Monroe County, Habitat for Humanity Monroe C. (a) Name and address of organization or government Monroe\_County Humane Associat Monroe County United Ministri MCCSC School Assistance Fund \_ 151\_N Delware\_St\_Suite 1640 Hoosier Hills Food Bank \_ Indiana Legal\_Services Indianapolis, IN 46204 Bloomington, IN 47404 Bloomington, IN 47408 Bloomington, IN 47402 Bloomington, IN 47402 Bloomington, IN 47404 Bloomington, IN 47404 Bloomington, IN 47401 Bloomington, IN 47401 First United Church. Bloomington, IN 47401 404 W Kirkwood Ave \_ 200\_E Winslow Road \_Middle\_Way\_House\_ \_\_827\_W 14th Court. \_ 213\_S\_K1rkwood\_ \_\_315\_North\_Dr\_\_ \_ 2420 E\_3rd St\_ \_\_1108\_W\_8th\_St\_ \_\_LIFEDesigns\_\_ PO Box 1334\_ Name of the organization \_Girls\_Inc\_ \_ <u>PO Box\_697</u>

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Continuation Page 2

Schedule I Cont (Form 990) 2013 Indigent food & Indigent food & Reproductive ed (h) Purpose of grant or assistance Developmental distribution Therapy with medical care Gen support Underserved Assistance disability education Employer identification number anımals & care shelter shelter school Youth Food 35-0985959 Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 13,174. 35,769. 44,496. (d) Amount of cash grant 18,494. 573. 9,940. 38,700. 57,775 12,172 (c) IRC section if applicable 35-2082414|501 (c) (3) 35-2107038|501 (c) (3) (3) 36-2617910 501 (c) (3) (c) (3) 06-1730901 501 (c) (3) ମ୍ 20-4383915|501 (c)\_<u>(3)</u> 35-1088650|501 (c) (3) (c) (၁) 35-0874276 501 74-3056968 501 35-1059827 501 (**b)** EIN Inc. United Way of Monroe County, (a) Name and address of organization or government Planned Parenthood of Indiana RBB\_School Assistance\_Fund \_ 1010\_S\_ Walnut\_Suite G\_\_\_ \_ People\_& Animal Learning\_ Mother Hubbards Cupboard \_Shalom\_Community\_Center\_ \_\_200\_S Meridian\_St #400 Indianapolis, IN 46206 Ellettsville, IN 47429 Volunteers in Medicine Bloomington, IN 47402 Bloomington, IN 47401 Bloomington, IN 47408 Bloomington, IN 47402 Bloomington, IN 47402 Bloomington, IN 47402 Bloomington, IN 47402 \_\_600\_S\_Edgewood\_Dr Salvation Army \_ \_ Stone Belt Arc. \_ Stepping Stones \_ 2815 E\_10th\_St\_ PO Box 1033 P.O. Box 1366 PO Box 2568 Name of the organization \_ PO Box\_2117. PO Box 451

TEEA4001L 07/12/13

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

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2013

Open to Public Inspection

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 35-0985959 United Way of Monroe County, Inc. Form 990, Part VI, Line 11b - Form 990 Review Process Reviewed by a committee of the board and available to the entire board. Detailed review by Executive Director with President and Treasurer Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts All Board members must complete a conflict of interest form each year and summit it to the organization. The conflict of interest form would disclose any conflicts that may be present which then could be explored to determine the extent of the conflict. So far, there have been no conflicts to report except for board member also serving as uncompensated board member of an agency receiving allocation. Member abstains from any vote relating to that agency. Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees Every year a systematic review of salaries for all employees is conducted. Comparisons are made to local, regional and national norms Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available We make our Articles of Incorporation, IRS Letter, Code of Ethics, and Form 990 available to the public in our offices. On our Web site, we place our Code of Ethics, Non-Discrimination Policy, Independent Auditor's report, and Form 990, our Program Service Accomplishments, and the United Way Worldwide membership standards.

### **UNITED WAY OF MONROE COUNTY #35-0985959**

Form 990, Schedule O
Program Service Accomplishments

United Way of Monroe County works with member agencies and a network of other community partners to provide comprehensive and collaborative solutions that help local residents improve their lives. We have served Monroe County since 1936, and became a United Fund/Way in 1956. We are a certified member of United Way Worldwide.



By focusing on the building blocks of a better life – Education, Earnings & Essentials — we create and support solutions to the most pressing issues in our community.

### Specifically, we work to meet these priorities:

	Our Priorities	
Education	Earnings	Essentials
Helping children, youth, and adults achieve their potential by:  • Entering school ready to succeed  • Graduating school ready to earn  • Building job and life skills	Helping hard working families get ahead by:  • Gaining and maintaining stable employment  • Increasing and retaining income  • Building savings and assets	Helping individuals and families meet basic needs with access to:  • Sufficient food  • A stable place to live  • Health care and wellness  • Crisis management skills
	Our Strategies	
<ul> <li>Support high-quality child care, after-school programs, healthy habits, and mentoring.</li> <li>Promote the development of children birth-to-five.</li> <li>Support efforts that help youth graduate high school with a viable plan for the future.</li> </ul>	<ul> <li>Increase the number of Earned Income Tax Credit filings</li> <li>Increase financial literacy.</li> <li>Provide job-related supports needed by working families</li> </ul>	<ul> <li>Invest in programs to ensure everyone has the essentials.</li> <li>Develop a planned response to help people recover from future disasters.</li> <li>Support and enhance the 211 information/referral hotline.</li> </ul>

In 2013, United Way invested \$1,235,557 in support of 24 certified member agencies, other exempt organizations, and United Way initiatives. Below are a few highlights of our efforts:

### We Partner in Initiatives that Achieve Results

### **EDUCATION:**

- The Monroe Smart Start Birth-to-Five Coalition continues to increase kindergarten readiness, support our youngest citizens, and empower parents and other caregivers. United Way partners with the Community Foundation of Bloomington and Monroe County to support and manage this coalition.
- More than 40 copies of the 'B is for Bloomington' ABC book were distributed to families at educational outreach events.
- We partner with IU Health Riley Physicians for a wellness-check based book distribution program. Each family receives a free age-appropriate book and a packet of information on ways to build early literacy and school readiness skills. In 2013, 4,356 books were distributed to children.

- Working with local early childhood education and health care providers, we bring United Way's Born Learning into childcare centers, nonprofit agencies, and pediatricians' offices. Born Learning encourages parents, grandparents, and caregivers to turn everyday tasks into learning experiences
- With IU Health Bloomington, we brought Kindergarten Countdown camp to at-risk pre-school students, increasing kids' readiness to start school.
- United Way, with additional funding from Duke Energy, launched Real Men Read in Owen County in August 2013. RMR brings male mentors into kindergarten classrooms to read a book each month with the goal of encouraging all children, particularly boys, to see reading as something that men value. During the first year, we distributed 985 books to 197 kindergarten students.
- United Way and the Chamber of Commerce convene the High School Plus coalition together with the schools, Prosecutor's Office, and other community partners to ensure every students will graduate school 'plus' have a viable plan for the future. The Coalition holds summits, publishes an e-newsletter, and is developing an online roadmap. These efforts, along with United Way's sponsorship of Check & Connect training, have contributed to a marked increase in the local graduation rate."
- We provide support for the Monroe County Youth Council, which brings young people together
  to create and administer youth-led projects, discuss public policy issues affecting youth, and serve
  as advisors to local organizations. In 2013, youth members and sponsors including United Way
  organized Global Youth Service Day for 230 high school students to do community improvement
  projects.

### **EARNINGS:**

- The Financial Stability Alliance (FSA) continues to bring financial resources and education to a four-county area. The monthly e-Newsletter highlights financial stability events, resources, news, funding, and training opportunities in Brown, Greene, Monroe, and Owen counties.
- The FSA website (www.FinancialStabilityAlliance.org) offers a community calendar of financial events, current financial stability news, and topical podcasts and materials. The FSA Resource Guide, published in Fall 2013, highlights local organizations that help people find employment, locate free tax preparation, open and maintain bank accounts, build financial education, access services for persons with disabilities, and locate affordable and safe
- United Way, the Monroe County Public Library, and our Financial Stability Alliance held weeklong Money Smart Weeks in spring and fall 2013, coordinating 11 financial education events that attracted over 124 participants. New events included an award-winning personal finance expert, a homeownership workshop, an interview and resume workshop, and a financial fun day
- Bank on Bloomington helped area residents, even those with troubled banking histories, open bank accounts, access financial education, and avoid payday loans and check-cashing fees. Five financial institutions currently participate in the program serving approximately 200 clients.
- Bank on Bloomington continues to offer the free, interactive "Get on the Path to Financial Success" workshop, which helps participants learn to manage a checking account, develop and maintain a budget, and identify and work towards financial goals.
- The Free Community Tax Service program brought together nearly 200 volunteers to assist local residents file 2,930 federal returns at 10 VITA sites and sites managed by AARP. Clients report using those saved funds (including over \$850,000 in tax preparation fees and increased Earning Income Tax Credits) to pay for food, clothing, bills, rent, and to put towards savings. In partnership with the IRS and others, the FCTS helped low-income people in Monroe and Owen counties.

### **ESSENTIALS:**

- United Way plays a key role in the Community Organizations Active in Disaster for Monroe County, which helps our community be prepared for and recover from natural disasters.
- We chair the Emergency Food and Shelter Board, a group of government, faith, and nonprofit leaders, to allocate federal funds that help low-income residents with food, rent, and utility costs

- Our staff provides technical assistance for Stamp Out Hunger, the nation's largest single food drive, which collected 87,483 pounds in our area.
- United Way provides support for the Monroe and Owen County "211 Infolink" service. In 2013, 2-1-1 specialists responded to 5,172 inquiries and made 7,836 referrals to community resources. Most callers were seeking help with housing and utilities assistance, income support, and health care
- Monroe and Owen county households saved \$31,612 in prescription drug costs (an average of 34%) with 1,923 claims through the FamilyWize discount prescription drug card distributed by United Way at agencies and pharmacies.
- We work with management, union, and state and local officials to assist workers who have become displaced from their jobs.
- United Way is collaborating with the YMCA of Monroe County, the City Parks and Recreation Department, the County Health Department, and others to promote ACHIEVE, a community-wide wellness initiative dedicated to making the healthy choice the easy choice.
- With support from United Way, the Housing Network developed a 10-year plan to end homelessness in our region.
- United Way serves on the local Affordable Care Act Enrollment Committee and provided funding so 2 Navigators could become state certified and assist at non-profit agencies.

### STRENGTHENING NON-PROFITS:

- We have full accreditation from United Way Worldwide, meeting or exceeding all membership standards. In the past several years, we earned the Chamber workforce award, a statewide communications award, the Chamber family-friendly workplace award, a Midwest staff excellence award, and were recognized by United Way Worldwide as one of ten national finalists for our work
- We bring critical funding into our community by providing important information to local, state and federal officials.
- With the City of Bloomington, Community Foundation, and SPEA, we sponsor the Nonprofit Alliance of Monroe County, which offers trainings, networking, and outreach opportunities to help strengthen the operations of all nonprofit organizations and prepare future professionals.
- Leaders of the UW member agencies meet monthly to share updates, discuss experience, and develop partnerships to increase the efficiency and effectiveness of their work.
- In collaboration with the Monroe County Public Library, we sponsored free access to a national grant search service for local agencies. We also assisted in the Library's development of Nonprofit Central, which provides resources and referrals for nonprofit professionals and volunteers.

We Invest in Member Agencies that Achieve Results				
Education	Earnings	Essentials		
<ul> <li>Of the high school seniors enrolled in mentoring programs at United Way member agencies, 100% graduated.</li> <li>Girls participating in Operation SMART at Girls Inc. improved their science knowledge by 68% and their math knowledge by 72%.</li> <li>646 school children received adequate clothing, shoes, and school supplies so they could fully participate in classes at MCCSC and RBB.</li> </ul>	<ul> <li>98% of clients involved with the Stone Belt and LifeDesigns supported employment programs gained new job skills.</li> <li>All of the youth who were unemployed at Stepping Stones spend at least 3 hours per week learning new employment skills.</li> <li>21 community members with disabilities transitioned into fully independent employment because they no longer needed workforce support.</li> </ul>	<ul> <li>About 142,913 bags of groceries and 1,234,005 meals were provided to community members at risk of hunger in Monroe, Owen, and Greene counties.</li> <li>All of the 396 adults and children given rent, mortgage, and utilities assistance through Salvation Army, Shalom Community Center, and Monroe County United Ministries were able to maintain stable housing</li> </ul>		

- Girls participating in Economic Literacy program at Girls Inc. improved their economic knowledge by 75%
- 74% of the children enrolled in preschool at Monroe County United Ministries [MCUM] had the basic math skills and 63% had the basic literacy skills to start kindergarten successfully.
- Of parents with a child at MCUM, 93% reported they are aware of how they can support their child's development and education at home.
- Five high school students eligible to take Dual Credit Courses, but unable to pay the \$100 textbook fee, received scholarships through the MCCSC School Assistance Fund, enabling them to earn college credit and strengthen their potential for success in post-secondary education.
- 62% of the teens in supportive living at Stepping Stones grew their life skills; 73% increased their financial management skills
- 93% of children taking part in programs at Middle Way House improved or maintained their grades and 92% had reduced absence or lateness at school

- 86% of parents with children enrolled at Monroe County United Ministries reported an improved family financial situation and 89% report improved employment opportunities because of MCUM's sliding-fee childcare.
- 433 community members took part in 1,194 JobLinks employment counseling session at Shalom Community Center and Area 10 Agency on Aging.
- 92% of clients obtained or maintained employment while recovering from addictions at Amethyst House 86% reported seeing an increase in income and 95% learned to develop budgeting skills
- 166 people experiencing or at-risk of homelessness were helped to obtain a birth certificate or ID, which will help them in securing housing, employment, health care, and other necessary resources
- The Shalom Center GED Class achieved a 63% success rate, the highest in an 8-county area, and helped 17 students earning their GED.

- 228 families were able to stay in their homes because of help from Indiana Legal Services.
- 2,197 uninsured, low-income adult clients received 9,031 primary and preventive care medical visits free of charge at Volunteers in Medicine. VIM provided 12,390 prescriptions to patients at no cost.
- 94% of at-risk teens and women residing in transitional housing were able to successfully move into stable, affordable, permanent housing upon program completion.
- 1,187 elderly neighbors were able to stay safely in their homes because affordable housing and home-based nutrition, visitation, and repair services were provided by Area 10 Agency on Aging.
- 79% of Amethyst House clients improved their physical health and 92% improved their mental health and wellness while recovering from addictions.
- 100% of teens at risk of homelessness used services to improve their physical and mental health while at Stepping Stones.

Schedule D, Part XIII - Supplementa	I Information Page
United Way of Monroe County, In	nc. 35-098599
Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990	
Other Revenue Included In F/S But Not Included On Form 990	
Uncollectable pleges	Total $\frac{$}{$}$ $\frac{6,137}{6,137}$ .
Cahadula D. Bart VI. Lina Ah	
Schedule D, Part XI, Line 4b Other Revenue Included On Form 990 But Not Included In F/S	
Designated contributions	\$ 354,515. Total \$ 354,515.
Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S	
Uncollectable pleges	\$ 6,137. Total \$ 6,137.
	Total \$ 6,137.
Schedule D, Part XII, Line 4b	
Other Expenses Included On Form 990 But Not Included In F/S	
Designated contributions paid	\$ 334,234. Total \$ 334,234.
	<del></del>

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2013

## **Schedule O - Supplemental Information**

Page 2

United Way of Monroe County, Inc.

35-0985959

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Difference between designation received and paid

Total  $\frac{$}{$}$   $\frac{-20,281}{-20,281}$ .

013 Sched	lule A, Part I\	/ - Suppleme	ental Inform	ation	Page
	United Way	y of Monroe Cou	nty, Inc.		35-09859
Part II, Line 10 - Other Incom	ne				
Nature and Source	2013	2012	2011	2010	2009
Miscellaneous Administrative fee CFC Campaign fees	\$ 30. \$ 10,403. 3,434.	\$ 99. \$ 10,932. 8,706.	5,626. \$ 16,960.	-40. \$ 14,398.	604. 34,449.
Total	$1 \pm \frac{3,434}{13,867}$	\$ 19,737.	22,586.	14,358. \$	35,053.

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### Form **8868** (Rev January 2014)

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.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

-	e filing for an Automatic 3-Month Extension, comp e filing for an Additional (Not Automatic) 3-Month	-		form)	X
Do not comp	olete Part II unless you have already been granted	an automa	itic 3-month extention on a previously file	ed Form 8868.	
Electronic fill corporation r request an ex Associated V	ing (e-file). You can electronically file Form 8868 equired to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in Fourth Certain Personal Benefit Contracts, which mung of this form, visit www irs gov/efile and click of	if you need automatic) 3 art I or Par ist be sent t	a 3-month automatic extension of time to 3-month extension of time. You can elect till with the exception of Form 8870, Info to the IRS in paper format (see instructio	o file (6 months for a tronically file Form 8 ormation Return for T	868 to Transfers
Part I	Automatic 3-Month Extension of Time.	nly subm	ut original (no copies needed).	<del></del>	
A corporation	n required to file Form 990-T and requesting an ai	utomatic 6-r	month extension - check this box and co	omplete Part I only	
All other corp income tax re	porations (including 1120-C filers), partnerships, F eturns	REMICs, and	,		
	Name of exempt organization or other filer, see instructions	<del> </del>	Enter filer's identif	fying number, see in	
Type or					
print File by the	United Way of Monroe County, Number, street, and room or suite number If a PO box, see a	Inc.		35-0985959 Social security number (	SSN
due date for filing your return See	441 S. College Avenue City, town or post office, state, and ZIP code For a foreign add	iress, see instr	uctions		
instructions	Bloomington, IN 47401				
Enter the Re	turn code for the return that this application is for	(file a sepa	arate application for each return)		01
Application Is For		Return Code	Application Is For		Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-BL		02	Form 1041-A		08
Form 4720 (I		03	Form 4720 (other than individual)		09
Form 990-PF		04	Form 5227		10
	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-1 (	(trust other than above)	06	Form 8870	<del> </del>	12
	ks are in the care of ► <u>United Way of Mon</u> ne No. ► 812-334-8370	nroe Co Fax No			
	ganization does not have an office or place of bus				▶ □
_	for a Group Return, enter the organization's four		•	f this is for the whole	aroup.
check thi	· -			mes and EINs of all	members
the exter	nsion is for.				
1   reque	est an automatic 3-month (6 months for a corpora	tion require	d to file Form 990-T) extension of time		
-	$8/15$ , 20 $14$ _, to file the exempt orga	ınızatıon ret	turn for the organization named above.		
_	tension is for the organization's return for:				
<u>► X</u>	calendar year 20 13 or				
<b>&gt;</b> _	tax year beginning , 20				
_	ax year entered in line 1 is for less than 12 monthange in accounting period	s, check re	ason: Initial return Fir	nal return	
3a If this a	application is for Forms 990-BL, 990-PF, 990-T, 4, undable credits. See instructions.	720, or 6069	9, enter the tentative tax, less any	3 a \$	

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

3 b \$

3 c |\$