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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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*.

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning July 1 , 2013, and ending June 30 , 20 14

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization **United Way of Central Massachusetts, Inc.**

Doing Business As

Number and street (or P O box if mail is not delivered to street address) **484 Main Street** Room/suite **300**

City or town, state or province, country, and ZIP or foreign postal code **Worcester, MA 01608-1893**

D Employer identification number **04-2104017**

E Telephone number **508.757.5631**

G Gross receipts $ **10,061,791**

F Name and address of principal officer **Timothy J. Garvin** same as above

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

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

J Website: ▶ **www.unitedwaycm.org**

H(c) Group exemption number ▶

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation **1920**

M State of legal domicile **MA**

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

United Way of Central Massachusetts connects people and resources to improve the community.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	28
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	27
6	Total number of volunteers (estimate if necessary)	6	2,068
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	6,504,806	6,574,410
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	332,793	571,036
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	(21,491)	45,158
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,816,108	7,190,604
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,214,936	4,408,542
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,556,615	1,506,845
16a	Professional fundraising fees (Part IX, column (A), line 11e)	19,543	33,690
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 868,906		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	785,760	882,634
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6,576,854	6,831,711
19	Revenue less expenses. Subtract line 18 from line 12	239,254	358,893

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	9,798,009	10,941,768
21	Total liabilities (Part X, line 26)	4,336,698	4,366,641
22	Net assets or fund balances. Subtract line 21 from line 20	5,461,311	6,575,127

Part II Signature Block

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

Sign Here

Signature of officer — Date 2/13/2015

Type or print name and title: Timothy J. Garvin President and CEO

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat No. 11282Y Form **990** (2013)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission:

United Way of Central Massachusetts connects people and resources to improve the community.

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 3,659,555 including grants of $ 3,272,158) (Revenue $)

Community Impact Program - The Community Impact Program plays a critical role in improving our community. Our work is organized around Education, Family Stability and Health, which are considered essential building blocks for a successful life. By 2020 United Way, aspires to see a 10% change in the following factors in Central Massachusetts:

1. Increasing the high school graduation rate for at-risk youth
2. Reducing the child poverty rate
3. Reducing the childhood obesity rate.

In addition, this program helps to providing services to stabilize those who are unable to meet their basic needs due to conditions that create vulnerability. United Way of Central Massachusetts staff and volunteers, through a competitive process, evaluate funding proposals, select the highest quality agency programs to fund, and monitor program results to ensure maximum community impact. During FY 2014, 50 funded programs provided services in one or more of the three basic components for a successful life: education, family stability, and health.

4b (Code:) (Expenses $ 360.198 including grants of $ 304,293) (Revenue $)

Women's Initiative Community Impact Program - The Women's Initiative focuses on building, strengthening, and supporting the development of confident and safe adolescent girls, and has successfully brought about lasting change. Through educational events, grants for area programs, financial literacy education, and sponsorship of a comprehensive local needs assessment, the Women's Initiative of the United Way is a thriving vehicle of change for girls in central Massachusetts. During FY 2014, Women's Initiative delivered 5 full-day conferences for 392 middle-school girls, utilizing the time and talent of more than 100 professional women. In addition, the Women's Initiative Community Impact Program funded 12 community based programs and sponsored 6 local educational events.

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

All other programs described in schedule O

4d Other program services (Describe in Schedule O.)
(Expenses $ 1,360,129 including grants of $) (Revenue $)

4e Total program service expenses ▶ 5,379,882

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✓	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	✓	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		✓
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*	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	✓	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	✓	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		✓
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		✓
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		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17	✓	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✓
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✓
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✓	
22	Did the organization report more than $5,000 of grants 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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✓
26	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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	✓	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		✓
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	27		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) . .					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . .			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		✓
b	If "Yes," enter the name of the foreign country: ▶ ---------- See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
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?			7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .			7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . .	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .			14b		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . 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.	1a 28		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 26		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9	✓	

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	✓	
13	Did the organization have a written whistleblower policy?	13	✓	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ **Massachusetts**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ **James Hayes, United Way of Central MA, 484 Main Street, Suite 300, Worcester, MA 01608 508.757.5631 ext. 250**

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Bruce Gaultney Chair of the Board of Directors	1	✓		✓						
(2) Todd Bailey Treasurer	1	✓		✓						
(3) Frances Anthes Clerk	1	✓		✓						
(4) Glenda Anderson, MA LMHC At-large Board member	1	✓								
(5) Edward Augustus, Jr. At-large Board member	1	✓								
(6) Maribeth Bearfield At-large Board member	1	✓								
(7) Reverend Lois Bond, Ph.D. At-large Board member	1	✓								
(8) Melinda Boone, Ed.D. At-large Board member	1	✓								
(9) Douglas Brown At-large Board member	1	✓								
(10) Joseph Carlson At-large Board member	1	✓								
(11) James Coghlin, Jr. At-large Board member	1	✓								
(12) Patricia Ellis At-large Board member	1	✓								
(13) Joseph Freitas At-large Board member	1	✓								
(14) Eve Gilmore At-large Board member	1	✓								

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Bradley Johnson At-large Board member	1	✓								
(16) Steven Joseph At-large Board member	1	✓								
(17) Ralph Lambalot, PhD. At-large Board member	1	✓								
(18) James Leary At-large Board member	1	✓								
(19) Patsy Lewis At-large Board member	1	✓								
(20) Karen Ludington At-large Board member	1	✓								
(21) Nadia McGourthy At-large Board member	1	✓								
(22) Representative James J. O'Day At-large Board member	1	✓								
(23) Marcy Reed At-large Board member	1	✓								
(24) Edwin Thomas Shea, Jr. At-large Board member	1	✓								
(25) Reverend Clyde Talley At-large Board member	1	✓								
1b **Sub-total** ▶								0		
c **Total from continuation sheets to Part VII, Section A** ▶								320,341		
d **Total (add lines 1b and 1c)** ▶								320,341		

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Michael Tsostis At-large Board member		✓								
(16) Edward White At-large Board member		✓								
(17) Alex Zequeira At-large Board member		✓								
(18) Timothy Garvin President and CEO				✓	✓	✓		129,616		
(19) Jennifer Davis Carey Executive Director, Worc. Education Collaborative					✓			103,500		
(20) James Hayes Vice President, Finance and Operations				✓	✓			87,225		
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total ▶								320,341		
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

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	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 150,450				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 6,297				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 6,417,663				
	g	Noncash contributions included in lines 1a-1f: $ 0					
	h	**Total.** Add lines 1a–1f ▶		6,574,410			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f ▶		0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		88,527			88,527
	4	Income from investment of tax-exempt bond proceeds ▶		0			
	5	Royalties ▶		0			
			(i) Real / (ii) Personal				
	6a	Gross rents	6a 0				
	b	Less: rental expenses	6b 0				
	c	Rental income or (loss)	6c 0				
	d	Net rental income or (loss) ▶		0			0
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a 3,353,565				
	b	Less: cost or other basis and sales expenses	7b 2,871,187				
	c	Gain or (loss)	7c 482,509				
	d	Net gain or (loss) ▶		482,509			
	8a	Gross income from fundraising events (not including $ 0 of contributions reported on line 1c). See Part IV, line 18	8a 0				
	b	Less: direct expenses	8b 0				
	c	Net income or (loss) from fundraising events ▶		0			
	9a	Gross income from gaming activities. See Part IV, line 19	9a 0				
	b	Less: direct expenses	9b 0				
	c	Net income or (loss) from gaming activities ▶		0			
	10a	Gross sales of inventory, less returns and allowances	10a 0				
	b	Less: cost of goods sold	10b 0				
	c	Net income or (loss) from sales of inventory ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	Cost recovery fees	900099	45,158	45,158		
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d ▶		45,158			
	12	**Total revenue.** See instructions. ▶		7,190,604	45,158		88,527

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	4,408,542	4,408,542		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22 . . .	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . .	0	0		
4	Benefits paid to or for members . . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees	378,547	148,593	177,946	52,008
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . .	0	0	0	0
7	Other salaries and wages	859,124	288,874	163,613	406,637
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	36,557	13,369	7,050	16,138
9	Other employee benefits	148,507	51,513	24,712	72,282
10	Payroll taxes	84,110	30,051	21,627	32,432
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	515	0	515	0
c	Accounting	21,184	0	21,184	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	33,690			33,690
f	Investment management fees	42,867	0	42,867	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . .	181,339	152,803	24,869	3,667
12	Advertising and promotion	32,345	7,399	2,025	22,921
13	Office expenses	94,411	56,864	17,128	20,419
14	Information technology	130,854	32,167	22,986	75,701
15	Royalties	0	0	0	0
16	Occupancy	159,107	94,139	22,930	42,038
17	Travel	29,005	20,042	2,791	6,172
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	104,819	50,528	4,947	49,344
20	Interest	0	0	0	0
21	Payments to affiliates	55,973	17,202	13,582	25,189
22	Depreciation, depletion, and amortization .	21,326	6,741	5,126	9,459
23	Insurance	3,575	0	3,575	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	**Organization dues**	3,619	1,055	2,151	413
b	**Miscellaneous**	1,695	0	1,299	396
c					
d					
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	6,831,711	5,379,882	582,923	868,906
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	221,090	1	229,385
	2	Savings and temporary cash investments	1,276,947	2	1,636,376
	3	Pledges and grants receivable, net	2,189,141	3	2,039,611
	4	Accounts receivable, net	43,935	4	59,313
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	61,973	9	72,769
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 1,796,477			
	b	Less: accumulated depreciation — 10b: 1,739,973	61,356	10c	56,504
	11	Investments—publicly traded securities	4,638,545	11	5,373,838
	12	Investments—other securities. See Part IV, line 11	180,000	12	217,488
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	1,125,022	15	1,256,484
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	9,798,009	16	10,941,768
Liabilities	17	Accounts payable and accrued expenses	131,117	17	130,136
	18	Grants payable	3,865,583	18	3,869,293
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	6,344	21	5,075
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	333,654	25	362,137
	26	**Total liabilities.** Add lines 17 through 25	4,336,698	26	4,366,641
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	4,455,054	27	5,533,045
	28	Temporarily restricted net assets	527,649	28	563,747
	29	Permanently restricted net assets	478,608	29	478,608
		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	0	30	0
	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
	33	Total net assets or fund balances	5,461,311	33	6,575,127
	34	Total liabilities and net assets/fund balances	9,798,009	34	10,941,768

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,190,604
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,831,711
3	Revenue less expenses. Subtract line 2 from line 1	3	358,893
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,461,311
5	Net unrealized gains (losses) on investments	5	562,008
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	192,915
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,575,127

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: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	✓	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	✓	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017

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

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

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

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

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

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

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

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

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

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

9 ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

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

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .	6,795,165	6,736,415	6,570,572	6,677,662	6,609,855	33,389,669
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3 . . .	6,795,165	6,736,415	6,570,572	6,677,662	6,609,855	33,389,669
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,853,319
6 **Public support.** Subtract line 5 from line 4.						30,536,350

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	6,795,165	6,736,415	6,570,572	6,677,662	6,609,855	33,389,669
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	357,591	493,478	230,117	332,793	570,131	1,984,110
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	500	0	0	0	0	500
11 **Total support.** Add lines 7 through 10						35,374,279
12 Gross receipts from related activities, etc. (see instructions)					12	0

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	86.32 %
15	Public support percentage from 2013 Schedule A, Part II, line 14	15	88.93 %

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2013** Schedule A, Part III, line 17	18	%

19a **33⅓% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33⅓% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI****, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer (b) below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (***see instructions***):*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2014 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	**Excess distributions carryover to 2015.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013 . . .			
e	Excess from 2014 . . .			

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

Part II - Section B - Line 10 - United Way of Central Massachusetts, Inc. leases an office condominium it owns outright to other local non-profit agencies. The office is presently being used by the Southeast Asian Coalition free of charge.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

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

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

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ----------

4 Number of states where property subject to conservation easement is located ▶ ----------

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

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ----------

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $ ----------
(ii) Assets included in Form 990, Part X ▶ $ ----------

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

a Revenue included in Form 990, Part VIII, line 1 ▶ $ ----------
b Assets included in Form 990, Part X ▶ $

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

		Amount
c Beginning balance	1c	6,344
d Additions during the year	1d	0
e Distributions during the year	1e	1,269
f Ending balance	1f	5,075

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,046,954	5,555,135	6,019,433	4,689,553	4,490,482
b Contributions	0	181,567	6,484	418,617	111,940
c Net investment earnings, gains, and losses	1,295,389	623,123	(172,117)	1,205,679	361,496
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	(264,031)	(265,579)	(259,219)	(256,469)	(245,564)
f Administrative expenses	(53,269)	(47,292)	(39,446)	(37,947)	(28,801)
g End of year balance	7,025,043	6,046,954	5,555,135	6,019,433	4,689,553

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

a Board designated or quasi-endowment ▶ 93%
b Permanent endowment ▶ 7%
c Temporarily restricted endowment ▶ 0%

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

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

		Yes	No
(i) unrelated organizations	3a(i)	✓	
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		367,137	367,137	0
c Leasehold improvements		774,288	733,745	40,534
d Equipment		448,659	433,691	14,968
e Other		204,916	204,364	552
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				56,054

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶		

Part IX Other Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) **Beneficial in trust - United Way of Central Massachusetts Fund held at the Greater Worcester**	**950,525**
(2) **Community Foundation.**	
(3) **Beneficial in trust - Women's Initiative Fund in Honor of Lois B. Green held at the Greater Worcester**	**305,959**
(4) **Community Foundation.**	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	**1,256,484**

Part X Other Liabilities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) **Donor designated pledges**	**362,137**
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	**362,137**

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	7,036,879
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	562,008		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	(708,311)		
e	Add lines **2a** through **2d**			2e	(146,303)
3	Subtract line **2e** from line **1**			3	7,183,182
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	42,867		
b	Other (Describe in Part XIII.)	4b	(35,445)		
c	Add lines **4a** and **4b**			4c	7,422
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	7,190,604

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	5,923,063
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	5,923,063
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	42,867		
b	Other (Describe in Part XIII.)	4b	865,781		
c	Add lines **4a** and **4b**			4c	908,648
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	6,831,711

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

1. Part IV - United Way of Central Massachusetts served as a fiscal agent for the Diabetes Coalition of Massachusetts.

The total liability as of June 30, 2014 was $5,075.

2. Part V - Endowment Funds - Line 4:

The income generated from the organization's endowment funds are used to subsidize general administrative expenses and United Way of Central Massachusetts and the Women's Initiative Program of the United Way of Central Massachusetts.

3. Part XI line 2d Other - Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Designated donations - ($832,091)

Professional fund raising fees charged by other organizations - ($33,690)

Change in value of a beneficial interest in trust - $157,470

Total = ($708,311)

Part XIII Supplemental Information *(continued)*

4. Part XI line 4 - Amounts included on Form 990, Part IX, line 25, but not on line 1: - 4b Other -

Adjustment for gain from collection activity from prior year campaigns = $172,857

United Way of Central Massachusetts uses a historical average to estimated the uncollectible expense for the current year campaign. This adjustments reflects the impact of actual collections as compared to the original estimate.

5. Part XII line 4 - Amounts included on Form 990, Part IX, line 25, but not on line 1: - 4b Other -

Designated donations - $832,091

Professional fund raising fees charged by other organizations - $33,690

Total = $865,781

SCHEDULE G (Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
United Way of Central Massachusetts, Inc.

Employer identification number
04-2104017

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☑ Mail solicitations
b ☑ Internet and email solicitations
c ☑ Phone solicitations
d ☑ In-person solicitations
e ☑ Solicitation of non-government grants
f ☑ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1	Action for Boston Comm Dev.	COMECC/CFC	✓		108,466	13,720	94,746
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total	. . . . . ►						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Massachusetts

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ No %	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility . . . . . 13a %

b An outside facility . . . . . 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ ----------

Address ▶ ----------

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ---------- and the amount of gaming revenue retained by the third party ▶ $ ----------

c If "Yes," enter name and address of the third party:

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information:

Name ▶ ----------

Gaming manager compensation ▶ $ ----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Part 1 - 2b column iii -

ABCD, Inc. (Action for Boston Community Development, Inc.) administers the Commonwealth of Massachusetts Employee Charitable Campaign (COMECC) and the regional Combined Federal Campaign (CFC). ABCD, Inc. collects and distributes contributions from these campaigns net of its fundraising fees.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) 15-40 Connection Foundation 53 Otis Street, Westboro, MA 01581	26-2873903	501(c)(3)	11,000				Donor Designated
(2) Abby Kelley Foster House 52 High St. Worcester, MA 01609	04-2648411	501(c)(3)	5,588				Donor Designated
(3) Abby Kelley Foster House 52 High St. Worcester, MA 01609	04-2648411	501(c)(3)	2,734				Donor Desg,3rd Pty
(4) African Community Education 24 Chatham St. Worcester, Ma 01608	14-1970474	501(c)(3)	260				Donor Designated
(5) African Community Education 24 Chatham St. Worcester, Ma 01608	14-1970474	501(c)(3)	23,750				Program Operating
(6) AIDS Project Worcester 85 Green Street Worcester, MA	04-2970467	501(c)(3)	3,982				Donor Designated
(7) AIDS Project Worcester 85 Green Street Worcester, MA	04-2970467	501(c)(3)	2,394				Donor Desg,3rd Pty
(8) American Red Cross Central MA 2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	17,397				Donor Designated
(9) American Red Cross Central MA 2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	9,182				Donor Desg,3rd Pty
(10) American Red Cross Central MA 2000 Century Dr. Worcester, MA	53-0196605	501(c)(3)	173,000				Program Operating
(11) left blank intentionally							
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 5

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

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
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

1. 354 agencies received donor designations totaling $832,091 for this fiscal year.

2. Donor Designation Policy: Organizations receiving donor designated contributions undergo a screening process prior to the distribution of funds. Screening includes verification of current status as an IRS Code Section 501(c)(3) nonprofit organization and verification of PATRIOT Act compliance.

3. Grant Monitoring Policies: Grant awards are determined through an open and competitive process with two phases. The first phase determines the eligibility of the organization to qualify for funding. Organizational documents including program description, Board of Directors' roster, operating budget, financial review or audit, 501(c)(3) determination letter, and a non-discrimination policy are required. If accepted into Phase II, the applicant organization submits a detailed program application with specific outcome measurements to ensure the funded programs will achieve maximum community impact in the specified focus area. Programs receive funding through recommendations from volunteer committees with final approval by the full Board of Directors. The funded programs are monitored throughout the program cycle through regular reporting on progress toward outcomes and United Way coordinated site visits.

(continued on Schedule O.)

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Big Brothers Big Sisters Central MA/Metro West Worcester, MA	04-2317926	501(c)(3)	6,641				Donor Designated
(2) Big Brothers Big Sisters Central MA/Metro West Worcester, MA	04-2317926	501(c)(3)	5,689				Donor Desg,3rd Pty
(3) Big Brothers Big Sisters Central MA/Metro West Worcester, MA	04-2317926	501(c)(3)	78,000				Program Operating
(4) Boy Scouts - Knox Trail Council 490 Union Ave. Framingham, Ma	04-3308728	501(c)(3)	4,680				Donor Designated
(5) Boy Scouts - Knox Trail Council 490 Union Ave. Framingham, Ma	04-3308728	501(c)(3)	715				Donor Desg,3rd Pty
(6) Boy Scouts Mohegan Council 19 Harvard St. Worcester, MA 01609	04-2105867	501(c)(3)	15,511				Donor Designated
(7) Boy Scouts Mohegan Council Harvard St. Worcester, MA 01609	04-2105867	501(c)(3)	3,561				Donor Desg,3rd Pty
(8) Boys & Girls Club of Worcester 65 Tainter St. Worcester, MA 01610	04-2105851	501(c)(3)	22,300				Donor Designated
(9) Boys & Girls Club of Worcester ainter St. Worcester, MA 01610	04-2105851	501(c)(3)	8,050				Donor Desg,3rd Pty
(10) Boys & Girls Club of Worcester ainter St. Worcester, MA 01610	04-2105851	501(c)(3)	28,000				Program Operating
(11) Boys & Girls Club of Worcester ainter St. Worcester, MA 01610	04-2105851	501(c)(3)	1,987				Minor Capital
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) CASA Project, Inc. 100 Grove St. Worcester, MA 01605	04-2711865	501(c)(3)	1,333				Donor Designated
(2) CASA Project, Inc. 100 Grove St. Worcester, MA 01605	04-2711865	501(c)(3)	854				Donor Desg,3rd Pty
(3) CASA Project, Inc. 100 Grove St. Worcester, MA 01605	04-2711865	501(c)(3)	54,000				Program Operating
(4) CASA Project, Inc. 100 Grove St. Worcester, MA 01605	04-2711865	501(c)(3)	1,100				Minor Capital
(5) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	20,961				Donor Designated
(6) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	11,629				Donor Desg,3rd Pty
(7) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	41,000				Program Operating
(8) Catholic Charities Worc. County 10 Hammond Street Worcester, MA	04-2103979	501(c)(3)	5,000				Minor Capital
(9) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	5,111				Donor Designated
(10) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	1,213				Donor Desg,3rd Pty
(11) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	150,000				Program Operating
(12) left blank intentionally							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

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Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	35,000				General Operating
(2) Central MA Housing Alliance Bellevue Street Worcester, MA	04-2791448	501(c)(3)	3,921				Minor Capital
(3) Central MA Labor Agency 400 Washington St Auburn, MA 01501	34-1976280	501(c)(3)	7,311				Donor Designated
(4) Central MA Labor Agency 400 Washington St Auburn, MA 01501	34-1976280	501(c)(3)	1,500				Program Sponsorship
(5) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	3,346				Donor Designated
(6) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	3,896				Donor Desg, 3rd Pty
(7) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	56,000				Program Operating
(8) Children's Friend, Inc. 21 Cedar Street Worcester, MA 01609	04-2105856	501(c)(3)	2,500				Minor Capital
(9) Clark University 950 Main St. Worcester, MA 01610	04-2111203	501(c)(3)	2,500				Donor Designated
(10) Clark University 950 Main St. Worcester, MA 01610	04-2111203	501(c)(3)	12,000				Program Operating
(11) CHC of New England 393 Maple St, Springfield, MA 01105	13-6167225	501(c)(3)	10,994				Donor Designated
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 5

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Community Healthlink, Inc. 72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	5,258				Donor Designated
(2) Community Healthlink, Inc. 72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	1,586				Donor Desg, 3rd Pty
(3) Community Healthlink, Inc. 72 Jacques Ave Worcester, MA 01610	04-2626179	501(c)(3)	200,000				Program Operating
(4) Community Legal Aid 405 Main St Worcester, Ma 01608	04-2446242	501(c)(3)	2,429				Donor Designated
(5) Community Legal Aid 405 Main St Worcester, Ma 01608	04-2446242	501(c)(3)	2,134				Donor Desg, 3rd Pty
(6) Community Legal Aid 405 Main St Worcester, Ma 01608	04-2446242	501(c)(3)	82,500				Program Operating
(7) Community Legal Aid 405 Main St Worcester, Ma 01608	04-2446242	501(c)(3)	700				Minor Capital
(8) Dana Farber Cancer Institute 450 Brookline Ave. Boston, MA 02215	04-2263040	501(c)(3)	6,349				Donor Desg, 3rd Pty
(9) Dismas House of MA PO Box 30125 Worcester, MA 01603	54-2075825	501(c)(3)	353				Donor Designated
(10) Dismas House of MA PO Box 30125 Worcester, MA 01603	54-2075825	501(c)(3)	94				Donor Desg, 3rd Pty
(11) Dismas House of MA PO Box 30125 Worcester, MA 01603	54-2075825	501(c)(3)	43,000				Program Operating
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) EcoTarium 222 Harrington Way Worc. MA 01604	04-2105868	501(c)(3)	1,000				Donor Designated
(2) EcoTarium 222 Harrington Way Worc. MA 01604	04-2105868	501(c)(3)	3,519				Donor Desg, 3rd Pty
(3) EcoTarium 222 Harrington Way Worc. MA 01604	04-2105868	501(c)(3)	3,000				Program Sponsorship
(4) Elder Services of Worcester 411 Chandler St. Worcester, MA	04-2545221	501(c)(3)	5,410				Donor Designated
(5) Elder Services of Worcester 411 Chandler St. Worcester, MA	04-2545221	501(c)(3)	4,166				Donor Desg, 3rd Pty
(6) Elder Services of Worcester 411 Chandler St. Worcester, MA	04-2545221	501(c)(3)	52,000				Program Sponsorship
(7) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	04-2500932	501(c)(3)	200				Donor Designated
(8) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	04-2500932	501(c)(3)	1,599				Donor Desg, 3rd Pty
(9) Elm Park Center Early Childhood 284 Highland St. Worcester, MA	04-2500932	501(c)(3)	18,000				Program Sponsorship
(10) left blank intentionally							
(11) left blank intentionally							
(12) left blank intentionally							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	04-2485308	501(c)(3)	6,907				Donor Designated
(2) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	04-2485308	501(c)(3)	761				Donor Desg, 3rd Pty
(3) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	04-2485308	501(c)(3)	65,000				Program Operating
(4) Family Health Center of Worc. 26 Queen St. Worcester, MA 01610	04-2485308	501(c)(3)	3,423				Minor Capital
(5) Family Services of Central MA 1 Harvard St. Worcester, MA 01609	04-2103767	501(c)(3)	7,659				Donor Designated
(6) Family Services of Central MA 1 Harvard St. Worcester, MA 01609	04-2103767	501(c)(3)	52				Donor Desg, 3rd Pty
(7) Family Services of Central MA 1 Harvard St. Worcester, MA 01609	04-2103767	501(c)(3)	60,000				Program Operating
(8) Friendly House, Inc. 36 Wall St. Worcester, MA 01604	04-2104239	501(c)(3)	13,628				Donor Designated
(9) Friendly House, Inc. 36 Wall St. Worcester, MA 01604	04-2104239	501(c)(3)	3,174				Donor Desg, 3rd Pty
(10) Friendly House, Inc. 36 Wall St. Worcester, MA 01604	04-2104239	501(c)(3)	56,000				Program Operating
(11) Friendly House, Inc. 36 Wall St. Worcester, MA 01604	04-2104239	501(c)(3)	4,700				Minor Capital
(12) left blank intentionally							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

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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 Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) Girl Scouts of Crtl/Wstrn MA 81 Gold Star Blvd Worcester,MA	04-2103856	501(c)(3)	2,090				Donor Designated
(2) Girl Scouts of Crtl/Wstrn MA 81 Gold Star Blvd Worcester,MA	04-2103856	501(c)(3)	5,000				Program Sponsorship
(3) Girls Incorporated of Worcester 125 Providence St. Worcester, MA	04-2123666	501(c)(3)	10,812				Donor Designated
(4) Girls Incorporated of Worcester 125 Providence St. Worcester, MA	04-2123666	501(c)(3)	3,773				Donor Desg, 3rd Pty
(5) Girls Incorporated of Worcester 125 Providence St. Worcester, MA	04-2123666	501(c)(3)	74,450				Program Operating
(6) Girls Incorporated of Worcester 125 Providence St. Worcester, MA	04-2123666	501(c)(3)	2,500				Program Sponsorship
(7) Guild of St. Agnes 133 Granite Street Worcester, MA 01604	4-2104267	501(c)(3)	2,430				Donor Designated
(8) Guild of St. Agnes 133 Granite Street Worcester, MA 01604	4-2104267	501(c)(3)	363				Donor Desg, 3rd Pty
(9) Guild of St. Agnes 133 Granite Street Worcester, MA 01604	4-2104267	501(c)(3)	30,000				Program Operating
(10) Latino Education Institute 486 Chandler St, Worcester, MA	22-3248067	501(c)(3)	52				Donor Designated
(11) Latino Education Institute 486 Chandler St, Worcester, MA	22-3248067	501(c)(3)	112				Donor Desg, 3rd Pty
(12) Latino Education Institute 486 Chandler St, Worcester, MA	22-3248067	501(c)(3)	104,527				Program Operating

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) LUK Crisis Center, Inc. 545 Westminster St. Fitchburg, MA	04-2483679	501(c)(3)	663				Donor Designated
(2) LUK Crisis Center, Inc. 545 Westminster St. Fitchburg, MA	04-2483679	501(c)(3)	15,500				Program Operating
(3) Lutheran Social Services NE 14 E Worcester St, Ste 300, Worc MA	04-2496563	501(c)(3)	150				Donor Designated
(4) Lutheran Social Services NE 14 E Worcester St, Ste 300, Worc MA	04-2496563	501(c)(3)	75,000				Program Operating
(5) Lutheran Social Services NE 14 E Wor cester St, Ste 300, Worc MA	04-2496563	501(c)(3)	2,500				Minor Capital
(6) Mass Ed Co 484 Main St #500 Worc. MA 01608	23-7055676	501(c)(3)	500				Donor Designated
(7) Mass Ed Co 484 Main St #500 Worc. MA 01608	23-7055676	501(c)(3)	34,000				Program Operating
(8) Nativity School of Worcester 67 Lincoln St. Worcester, MA 01605	03-0385377	501(c)(3)	3,775				Donor Designated
(9) Nativity School of Worcester 67 Lincoln St. Worcester, MA 01605	03-0385377	501(c)(3)	286				Donor Desg, 3rd Pty
(10) Nativity School of Worcester 67 Lincoln St. Worcester, MA 01605	03-0385377	501(c)(3)	27,000				Program Operating
(11) Nichols College 124 Center Road, Dudley, MA 01571	04-2104778	501(c)(3)	10,000				Donor Designated
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 5

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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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 Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) Oak Hill CDC 74 Providence St. Worc. MA 01604	22-2599363	501(c)(3)	1,040				Donor Designated
(2) Oak Hill CDC 74 Providence St. Worc. MA 01604	22-2599363	501(c)(3)	35,000				General Operating
(3) Pernet Family Health Services 237 Millbury St. Worcester, MA	04-2453851	501(c)(3)	6,648				Donor Designated
(4) Pernet Family Health Services 237 Millbury St. Worcester, MA	04-2453851	501(c)(3)	286				Donor Desg, 3rd Pty
(5) Pernet Family Health Services 237 Millbury St. Worcester, MA	04-2453851	501(c)(3)	34,500				Program Operating
(6) Pernet Family Health Services 237 Millbury St. Worcester, MA	04-2453851	501(c)(3)	2,500				Minor Capital
(7) Rainbow Child Development 10 Edward Street Worcester, MA	04-2507815	501(c)(3)	2,661				Donor Designated
(8) Rainbow Child Development 10 Edward Street Worcester, MA	04-2507815	501(c)(3)	716				Donor Desg, 3rd Pty
(9) Rainbow Child Development 10 Edward Street Worcester, MA	04-2507815	501(c)(3)	49,000				Program Operating
(10) Rainbow Child Development 10 Edward Street Worcester, MA	04-2507815	501(c)(3)	1,826				Minor Capital
(11) left blank intentionally							
(12) left blank intentionally							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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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) Regional Environmental Council PO Box 255 Worcester, MA 01613	04-6364350	501(c)(3)	260				Donor Designated
(2) Regional Environmental Council PO Box 255 Worcester, MA 01613	04-6364350	501(c)(3)	56,000				Program Operating
(3) Seven Hills Foundation 81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	460				Donor Designated
(4) Seven Hills Foundation 81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	1,026				Donor Desg, 3rd Pty
(5) Seven Hills Foundation 81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	17,428				Program Operating
(6) Seven Hills Foundation 81 Hope Ave Worcester, MA 01603	04-2274992	501(c)(3)	2,000				Minor Capital
(7) S. Middlesex Opportunity Cncl 300 Howard St. Framingham, MA	04-2389659	501(c)(3)	52				Donor Designated
(8) S. Middlesex Opportunity Cncl 300 Howard St. Framingham, MA	04-2389659	501(c)(3)	203				Donor Desg, 3rd Pty
(9) S. Middlesex Opportunity Cncl 300 Howard St. Framingham, MA	04-2389659	501(c)(3)	100,000				Program Operating
(10) S. Middlesex Opportunity Cncl 300 Howard St. Framingham, MA	04-2389659	501(c)(3)	3,000				Minor Capital
(11) left blank intentionally							
(12) left blank intentionally							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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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) Southeast Asian Coalition 484 Main St. Suite 400 Worc. MA	04-3393955	501(c)(3)	52				Donor Designated
(2) Southeast Asian Coalition 484 Main St. Suite 400 Worc. MA	04-3393955	501(c)(3)	14,025				Program Operating
(3) St. Francis Epsicopal Church 70 Highland St. Holden, Ma 01520	04-3095047	501(c)(3)	8,861				Donor Desg, 3rd Pty
(4) SHCAB, Inc. Newburyport, MA 01950	30-0707429	501(c)(3)	7,500				CAF Grant
(5) The Bridge of Central MA 4 Mann St. Worcester, MA 01602	04-2701581	501(c)(3)	447				Donor Designated
(6) The Bridge of Central MA 4 Mann St. Worcester, MA 01602	04-2701581	501(c)(3)	60				Donor Desg, 3rd Pty
(7) The Bridge of Central MA 4 Mann St. Worcester, MA 01602	04-2701581	501(c)(3)	45,000				Program Operating
(8) Trinity Lutheran Church 73 Lancaster St. Worc. MA 01609	04-6066833	501(c)(3)	5,741				Donor Desg, 3rd Pty
(9) UMass Memorial - HOPE Coalition 26 Queen St. Worc. MA	04-2626179	501(c)(3)	130				Donor Desg, 3rd Pty
(10) UMass Memorial - HOPE Coalition 26 Queen St. Worc. MA	04-2626179	501(c)(3)	70,000				Program Operating
(11) left blank intentionally							
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 7

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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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) UW - North Central MA 649 John Fitch Hwy, Fitchburg MA	04-2233021	501(c)(3)	5,392				Donor Designated
(2) UW - North Central MA 649 John Fitch Hwy, Fitchburg MA	04-2233021	501(c)(3)	5,372				Donor Desg, 3rd Pty
(3) UW - Southbridge, Sturbridge, and Charlton Southbridge MA	04-2308155	501(c)(3)	5,336				Donor Designated
(4) UW - Southbridge, Sturbridge, and Charlton Southbridge MA	04-2308155	501(c)(3)	6,289				Donor Desg, 3rd Pty
(5) UW - Tri-County 46 Park Street Framingham, MA	04-2104231	501(c)(3)	7,794				Donor Designated
(6) UW - Tri-County 46 Park Street Framingham, MA	04-2104231	501(c)(3)	18,275				Donor Desg, 3rd Pty
(7) UW - Webster & Dudley PO Box 636 Webster, MA 01570	04-2380352	501(c)(3)	3,329				Donor Designated
(8) UW - Webster & Dudley PO Box 636 Webster, MA 01570	04-2380352	501(c)(3)	4,510				Donor Desg, 3rd Pty
(9) Valley Residence for Improve... 176 Tacoma Street Worcester, MA	04-2702167	501(c)(3)	38,000				Program Operating
(10) Valley Residence for Improve... 176 Tacoma Street Worcester, MA	04-2702167	501(c)(3)	5,000				Minor Capital
(11) left blank intentionally							
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 6

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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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) Veterans Inc. 69 Grove St. Worcester, Ma 01605	04-3098024	501(c)(3)	3,952				Donor Designated
(2) Veterans Inc. 69 Grove St. Worcester, Ma 01605	04-3098024	501(c)(3)	1,170				Donor Desg, 3rd Pty
(3) VSA Massachusetts 89 South St.Suite101,Boston, Ma	04-2699540	501(c)(3)	8,000				CAF Grant
(4) Webster Square Day Care Center 1048 Main St. Worcester, MA	04-2449880	501(c)(3)	2,275				Donor Designated
(5) Webster Square Day Care Center 1048 Main St. Worcester, MA	04-2449880	501(c)(3)	201				Donor Desk, 3rd Pty
(6) Webster Square Day Care Center 1048 Main St. Worcester, MA	04-2449880	501(c)(3)	33,000				Program Operating
(7) Worcester Community Action Council 484 Main St. Worcester, MA	04-2382160	501(c)(3)	6,655				Donor Designated
(8) Worcester Community Action Council 484 Main St. Worcester, MA	04-2382160	501(c)(3)	780				Donor Desk, 3rd Pty
(9) Worcester Community Action Council 484 Main St. Worcester, MA	04-2382160	501(c)(3)	35,000				Program Operating
(10) Worcester Community Action Council 484 Main St. Worcester, MA	04-2382160	501(c)(3)	155,000				CSF Grant
(11) left blank intentionally							
(12) left blank intentionally							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 4

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

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Internal Revenue Service

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(1) Worcester County Food Bank 474 Boston Trnpke Shrewsbury, MA	04-3071457	501(c)(3)	25,616				Donor Designated
(2) Worcester County Food Bank 474 Boston Trnpke Shrewsbury, MA	04-3071457	501(c)(3)	6,127				Donor Desg, 3rd Pty
(3) Worcester Education Dev Fndn Ste 224, 210 Park Ave, Worc. MA	56-2522670	501(c)(3)	330				Donor Designated
(4) Worcester Education Dev Fndn Ste 224, 210 Park Ave, Worc. MA	56-2522670	501(c)(3)	28,000				Program Operating
(5) Worcester Public Library Fnd 3 Salem Sq. Worcester, MA 01608	20-006677	501(c)(3)	6,000				Donor Designated
(6) Worcester Public Library Fnd 3 Salem Sq. Worcester, MA 01608	20-006677	501(c)(3)	68,400				CAF Grant
(7) Worcester Public Library Fnd 3 Salem Sq. Worcester, MA 01608	20-006677	501(c)(3)	5,810				CSF Grant
(8) Worcester Roots Project 5 Pleasant Street 3rd Fl, Worc MA	05-0566468	501(c)(3)	18,000				Program Operating
(9) Worcester Roots Project 5 Pleasant Street 3rd Fl, Worc MA	05-0566468	501(c)(3)	4,200				Minor Capital
(10) Worcester Youth Center 326 Chandler St. Worc, MA 01602	04-3245867	501(c)(3)	2,507				Donor Designated
(11) Worcester Youth Center 326 Chandler St. Worc, MA 01602	04-3245867	501(c)(3)	140				Donor Desg, 3rd Pty
(12) Worcester Youth Center 326 Chandler St. Worc, MA 01602	04-3245867	501(c)(3)	82,500				Program Operating

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 5

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(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) YMCA of Central MA 766 Main St. Worcester, MA 01610	04-2105885	501(c)(3)	3,991				Donor Designated
(2) YMCA of Central MA 766 Main St. Worcester, MA 01610	04-2105885	501(c)(3)	3,340				Donor Desg, 3rd Pty
(3) YOU, Inc. 81 Plantation St. Worcester, MA	23-7112665	501(c)(3)	22,121				Donor Designated
(4) YOU, Inc. 81 Plantation St. Worcester, MA	23-7112665	501(c)(3)	1,074				Donor Desg, 3rd Pty
(5) YOU, Inc. 81 Plantation St. Worcester, MA	23-7112665	501(c)(3)	709,600				Program Operating
(6) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	12,568				Donor Designated
(7) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	3,263				Donor Desg, 3rd Pty
(8) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	266,013				Program Operating
(9) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	15,058				CAF Grant
(10) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	2,500				Program Sponsorship
(11) YWCA of Central MA 1 Salem Sq. Worcester, MA 01608	04-2105873	501(c)(3)	5,000				Minor Capital
(12)							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? **2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? **4a**		✓
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**		✓
c	Participate in, or receive payment from, an equity-based compensation arrangement? **4c**		✓
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? **5a**		✓
b	Any related organization? **5b**		✓
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? **6a**		✓
b	Any related organization? **6b**		✓
	If "Yes" to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III **7**		✓
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**		✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Timothy J. Garvin, Pres/CEO	(i)	129,616	0	0	0	19,236	148,852	
	(ii)							
2 Jennifer Davis Carey, Exec Dir.	(i)	103,500	0	0	0	6,305	109,805	
	(ii)							
3 James L. Hayes, VP Finance/Ops	(i)	87,225	0	0	0	16,756	103,981	
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

The Executive Committee acts as a Compensation Committee recommending any changes to the President/CEO salary. Any recommendations are subject to full Board of Directors approval.

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No 1545-0047

2014

Open To Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	(d) Corrected? No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	(d) Loan to or from the organization? From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	(g) In default? No	(h) Approved by board or committee? Yes	(h) Approved by board or committee? No	(i) Written agreement? Yes	(i) Written agreement? No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total						▶ $							

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Frances Anthes	Board Member	76,090	Grants/Donor Designation		✓
(2) Karen Ludington	Board Member	65,742	Grants/Donor Designation		✓
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

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2014

Open to Public Inspection

Name of the organization

United Way of Central Massachusetts, Inc.

Employer identification number

04-2104017

Community Services Program

Volunteer Center - The United Way of Central Massachusetts supports a Volunteer Center internal to its operations. Since 1967, the of the Hands on Network and offers an array of services that build the capacity for effective volunteering. The Center recruits volunteers for organizations, provides training opportunities, information and referral, placement services, recognition activities and participates in strategic initiatives that mobilize volunteers to meet local needs. The Center also manages Volunteer Solutions an on-line database of volunteer opportunities in central Massachusetts. The following list represents unique volunteer opportunities offered by the Center:

Earned Income Tax Credit (EITC) Initiative - Through the EITC Initiative, UWCM is addressing Financial Stability by helping taxpayers claim federal rebates. We are part of the Worcester EITC Coalition, which is working to create awareness about the EITC and engage volunteers to help prepare taxes for free. The Coalition recruits volunteers to serve at VITA sites and helps people claim eligible tax credits. We are also working to build awareness about financial issues such as predatory lending practices, pay day loans, and predatory tax preparation services that further hinder an individual's ability to save and build assets.

Day of Caring - The Volunteer Center at United Way of Central Massachusetts coordinates many events to promote voluntarism and leadership. In September 2013, we hosted our Annual Day of Caring, the largest one-day volunteer drive in the entire region, where over 1,280 people took to the streets of central Massachusetts to volunteer at dozens of locations for the day.

Total investment in the Community Services program = $138,666

Mass 2-1-1 - United Way of Central Massachusetts collaborates with other United Way's across the state, to fund the Mass 2-1-1 referral service to help with non-life threatening needs. 2-1-1 is an easy to remember telephone number that connects callers to information about health and human services available in their community. It serves as a resource for finding government benefits and services, non-profit organizations, support groups, volunteer opportunities, donation programs, and other local resources. Total investment = $29,655

AFL-CIO Labor Community Services Program - The AFL-CIO Labor Community Services Program coordinates many programs to benefit members of organized labor, their families and the community at large. Members of organized labor participate in United Way's Day of Caring, organize the Handicapped Ramp Program, NALC food drive, the Holiday Toy Drive and other special projects. One of the most

Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017

important roles of the Labor Community Services Program is to design and provide training sessions for union members, their families and other community partners. Volunteers from NALC Branch 12 delivered 348,000 pounds of food to organizations serving the hungry in Central Massachusetts. Total investment = $127,298.

Fiscal Sponsorships - The United Way of Central Massachusetts is serving as fiscal sponsor for the Investing in Girls Alliance (IIGA) and for the Worcester Education Collaborative (WEC). The IIGA provides research, education, advocacy, and programs to address the needs of middle-school girls in the Worcester area. The WEC is an independent advocacy organization working to ensure that students in the Worcester Public Schools are given the opportunity to succeed at the highest possible level and to acquire the skills and knowledge to master the challenges of the 21st century. The WEC is committed to supporting, facilitating, and developing a wide variety of partnerships among families, schools, organizations, and businesses that will both enhance the quality of public education in Worcester and the quality of our common life. The IIGA had income of $90,193 and expenses of $69,370 included in United Way of Central Massachusetts' financial statements for this fiscal year. The WEC had income of $167,842 and expenses of $179,714 (including $8,332 for for management and general, and $8,331 for fundraising) included in United Way of Central Massachusetts' financial statements for this fiscal year.

Donor Designations - The United Way of Central Massachusetts facilitates the collection and distribution of donor designated pledges and gifts to other 501(c)(3) nonprofit organizations. 354 agencies received donor designated contributions totaling $832,091 in FY 2014.

Part VI - Section A - Line 9

Bruce Gaultney, Worcester Telegram & Gazette, 100 Front Street, Worcester, MA 01608

Todd M. Bailey, Fallon Community Health Plan, 10 Chestnut Street, Worcester, MA 01608

Frances Anthes, Family Health Center of Worcester, 26 Queen Street, Worcester, MA 01610

Glenda L. Anderson, MA LMHC, Psychotherapy and Wellness Services, 15 Midstate Drive, Suite 206, Auburn, MA 01501

Edward M. Augustus, Jr., College of the Holy Cross, 1 College Street, P.O. Box GCR, Worcester, MA 01610

continued on additional Schedule O

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

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Name of the organization

United Way of Central Massachusetts, Inc.

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04-2104017

Part VI - Section A - Line 9 (continued)

Maribeth Bearfield, The Hanover Insurance Group, Inc., 440 Lincoln Street, Worcester, MA 01653

Reverend Louis G. Bond, Ph.D. 30 Cherry Lane, South Grafton, MA 01560

Melinda J. Boone, Ed.D. Worcester Public Schools, 20 Irving Street, Worcester, MA 01609

Douglas Brown, UMass Memorial Health Care, Inc., 365 Plantation Street, Suite 300, Worcester, MA 01605

Joseph P. Carlson, United Steel Workers of America - District 4 100 Medway Road, Ste. 403, Milford, MA 01751

James W. Coghlin, Jr. Coghlin Companies, Inc. 17 Briden Street, Worcester, MA 01605

Patricia Ellis, St. Vincent Hospital, 123 Summer Street, Worcester, MA 01608

Joseph D. Freitas, The Hanover Insurance Group, Inc., 440 Lincoln Street, E10, Worcester, MA 01653

Eve Gilmore, Edward Street Child Services, 34 Cedar Street, Worcester, MA 01609

Bradley Johnson, Saint-Gobain, 1 New Bond Street, P.O. Box 15008, Worcester, MA 01615-0008

Steven Joseph, Unum Group, 1 Mercantile Street, Worcester, MA 01608

Ralph Lambalot, PhD., AbbVie Bioresearch Center, 100 Research Drive, Worcester, MA 01605

James Leary, University of Massachusetts Medical School, 55 Lake Avenue North, Worcester, MA 01655

Patsy C. Lewis, 72 Beaconsfield Road, Worcester, MA 01602

Karen Ludington, Children's Friend, Inc., 21 Cedar Street, Worcester, MA 01609

Nadia McGourthy, Dresser & McGourthy, LLP, 50 Elm Street, Suite 4, Worcester, MA 01609

Representative James J. O'Day, State House - Room 42, Boston MA 02133

Marcy Reed, National Grid, 40 Sylvan Road, Waltham, MA 02451

Edwin Thomas Shea, Jr., Bank of America, 100 Front Street, MA6-231-20-04, Worcester, MA 01608

Reverend Clyde Talley, Belmont A.M.E. Zion Church, 55 Illinios Street, Worcester, MA 01610

Michael Tsostis, Benefit Development Group, 446 Main Street, Worcester, MA 01608

Edward H. White, National Grid, 40 Sylvan Road, Waltham, MA 02451

Alex Zequeira, Nativity School of Worcester, 67 Lincoln Street, Worcester, MA 01605

Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017

Part VI - Section B - Line 11b: The Finance Committee received a draft version of the Form 990 and all supporting schedules at its November 7, 2014 meeting. The full Board of Directors received a copy of the final version of the Form 990 and all supporting schedules to review in advance of its November 19, 2014 meeting. The document review was included as an agenda item for that meeting.

Part VI - Section B - Line 12c - The Board of Directors annually sign a conflict of interest statement listing affiliations with other organizations that could potentially pose a conflict of interest. Board members abstain from voting on issues or recommendations related to those organizations.

Part VI - Section B - Line 15b - The Executive Committee conducts an annual performance review of the CEO and recommends any compensation adjustments to the full Board of Directors. Compensation for the Vice President of Finance and Operations is determined by the CEO. All compensation is included in the organization's budget which is reviewed by the Finance Committee and approved by the full Board of Directors.

Part VI - Section C - Line 19 - United Way of Central Massachusetts posts its annual audited financial statements and its Form 990 and all supporting schedules on its web site. The documents are also available for public review at the organization's office. The conflict f interest statements are not made available directly to the public, but minutes from all board meetings including all votes taken are available to the public at the United Way of Central Massachusetts office.

Part XI - Question 9 - Other changes in net assets of fund balances - United Way of Central Massachusetts has two funds established at the Greater Worcester Community Foundation. The change in values of these funds is listed as a separate line item in the Statement of Activities in the audited financial statements. This change for FY 2014 was $157,470.

United Way of Central Massachusetts estimates its uncollectible expense on its present year campaign based on historical data. Per IRS requirements, the variance of actual collections from prior campaign year uncollectible estimates should be included on this line. The adjustment for collections from prior year campaigns included in the FY 2014 audited financial statements was $35,445.

Total Other changes in net assets of fund balances = $192,915.

SCHEDULE O (Form 990 or 990-EZ)	**Supplemental Information to Form 990 or 990-EZ**	OMB No 1545-0047
	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	**2014**
Department of the Treasury Internal Revenue Service	▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*	**Open to Public Inspection**

Name of the organization	Employer identification number
United Way of Central Massachusetts, Inc.	04-2104017

Continuation of Schedule I - Part IV - Donor Designations - Organizations receiving donor designations have been screened to verify 501(c)(3) status and PATRIOT Act compliance.

Minor Capital Grants - Minor capital grants were also awarded by a competitive process based on need. Receipts of final purchases are required as documentation. The grants are approved by the full Board of Directors.

Schedule I Codes and Definitions (column h):

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

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

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

General Operating - An unrestricted grant made to an agency in support of its general operating costs.

IIGA Grant - A restricted grant made to fund an agency program from the Investing in Girls Alliance.

Minor Capital - Grants awarded for purchases of minor capital items.

Program Operating - A restricted grant made to an agency in support of the costs associated with a specific program that it operates.

Program Spnsrshp - Sponsorship of an agency event.

Overhead Calculation:

The standard formula for calculating the overhead ratio among United Ways is as follows:

Core Form, Part IX, line 25, Column C (M&G Exp.) + Column D (Fundraising Exp.) divided by

Core Form, Part VIII, Line 12, Column A (Total Revenue)

For United Way of Central Massachusetts this calculation is as follows: (582,923 + 868,906) / 7,190,604 = 20.19%

The actual management/general (m & g) and fundraising expenses increased by $13,637 from the previous fiscal year. These expenses include $16,663 of m & g and fundraising expenses for the Worcester Education Collaborative (WEC). UWCM serves as the fiscal sponsor for the WEC.

Annually, UWCM subsidizes its m & g and fundraising expenses through distributions from its investments and the UWCM Fund held at the Greater Worcester Community Foundation. The total subsidy for FY 2014 was $254,031. This subsidy allows UWCM to invest over 82% of its current year revenue into program services. This subsidy is not included in the overhead calculation above.

United Way of Central Massachusetts, Inc.

Financial Statements as of and for the Years Ended June 30, 2014 and 2013 and Independent Auditors' Report

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

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STOWE & DEGON LLC
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

INDEPENDENT AUDITORS' REPORT

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

We have audited the accompanying financial statements of the United Way of Central Massachusetts, Inc. (the Organization; a non-profit organization), which comprise the statements of financial position as of June 30, 2014 and 2013, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the United Way of Central Massachusetts, Inc. as of June 30, 2014 and 2013, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Stowe & Degon LLC

October 14, 2014

95A TURNPIKE ROAD • WESTBOROUGH, MASSACHUSETTS 01581
TELEPHONE (508) 983-6700 • FAX (508) 983-6701
www.stowedegon.com

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2014 AND 2013

	2014	2013
ASSETS		
CURRENT ASSETS:		
Cash and cash equivalents	$ 1,865,761	$ 1,498,037
Pledges receivable, net (Note 3)	2,039,611	2,189,141
Accounts receivable and other assets	132,082	105,908
Total current assets	4,037,454	3,793,086
Investments	5,591,326	4,818,545
Beneficial interest in trust (Note 14)	1,256,484	1,125,022
Property and equipment, net	56,504	61,356
Total Assets	$ 10,941,768	$ 9,798,009
LIABILITIES AND NET ASSETS		
Accounts payable	$ 18,535	$ 14,700
Accrued expenses	111,601	116,417
Community impact grants payable (Note 15)	3,573,575	3,567,719
Women's initiative grants payable	300,793	304,208
Designations payable	362,137	333,654
Total Liabilities	4,366,641	4,336,698
Net Assets:		
Unrestricted	5,533,045	4,455,054
Temporarily restricted	563,474	527,649
Permanently restricted	478,608	478,608
Total Net Assets	6,575,127	5,461,311
Total Liabilities and Net Assets	$ 10,941,768	$ 9,798,009

See notes to financial statements.

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF ACTIVITIES
YEAR ENDED JUNE 30, 2014

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Support and Revenue:				
Campaign Revenue	$ 5,383,522	$ 642,823	$ -	$ 6,026,345
Less:				
Designations	(832,091)	-	-	(832,091)
Administrative fees	(33,690)	-	-	(33,690)
Allowance for uncollectible pledges (Note 3)	(170,611)	-	-	(170,611)
Net assets released from restrictions	653,696	(653,696)	-	-
Net Campaign Revenue	5,000,826	(10,873)	-	4,989,953
Investment income (net of expenses)	31,210	-	-	31,210
Gain on sale of investments	482,509	-	-	482,509
Unrealized gain on investments	562,008	-	-	562,008
Interest income	14,450	-	-	14,450
Change in beneficial interest in trust (Note 14)	119,722	37,748	-	157,470
Donor designation fees	45,158	-	-	45,158
Grant and sponsorship income (Note 17)	402,396	351,725	-	754,121
Net assets released from restrictions	342,775	(342,775)	-	-
Total Support and Revenue	7,001,054	35,825	-	7,036,879
Expenses:				
Community Impact Grants (Note 15)	2,848,000	-	-	2,848,000
Women's Initiative Grants (Note 15)	304,293	-	-	304,293
Other Grants/Sponsorships	424,158	-	-	424,158
Program Services:				
Community Services	138,666	-	-	138,666
Mass 211	29,655	-	-	29,655
Labor Community Services	127,298	-	-	127,298
Community Impact	387,397	-	-	387,397
Women's Initiative Community Impact	55,905	-	-	55,905
Other Programs	232,422	-	-	232,422
Total Program Services	971,343	-	-	971,343
Supporting Services	1,375,269	-	-	1,375,269
Total Expenses	5,923,063	-	-	5,923,063
Increase in Net Assets	1,077,991	35,825	-	1,113,816
Net Assets - beginning	4,455,054	527,649	478,608	5,461,311
Net Assets - ending	$ 5,533,045	$ 563,474	$ 478,608	$ 6,575,127

See notes to financial statements.

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF ACTIVITIES
YEAR ENDED JUNE 30, 2013

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Support and Revenue:				
Campaign Revenue	$ 5,365,137	$ 673,293	$ -	$ 6,038,430
Less:				
Designations	(786,702)	-	-	(786,702)
Administrative fees	(19,543)	-	-	(19,543)
Allowance for uncollectible pledges (Note 3)	(5,016)	-	-	(5,016)
Net assets released from restrictions	686,449	(686,449)	-	-
Net Campaign Revenue	5,240,325	(13,156)	-	5,227,169
Investment income (net of expenses)	45,497	-	-	45,497
Gain on sale of investments	237,100	-	-	237,100
Unrealized gain on investments	181,912	-	-	181,912
Interest income	14,683	-	-	14,683
Change in beneficial interest in trust (Note 14)	75,866	23,860	-	99,726
Donor designation fees	32,106	-	-	32,106
Grant and sponsorship income (Note 17)	116,879	366,770	160,599	644,248
Net assets released from restrictions	361,525	(361,525)	-	-
Total Support and Revenue	6,305,893	15,949	160,599	6,482,441
Expenses:				
Community Impact Grants (Note 15)	2,828,354	-	-	2,828,354
Women's Initiative Grants (Note 15)	316,208	-	-	316,208
Other Grants/Sponsorships	283,672	-	-	283,672
Program Services:				
Community services	152,883	-	-	152,883
Mass 211	42,756	-	-	42,756
Labor Community Services	119,865	-	-	119,865
Community Impact	403,672	-	-	403,672
Women's Initiative Community Impact	56,369	-	-	56,369
Other programs	220,218	-	-	220,218
Total Program Services	995,763	-	-	995,763
Supporting Services	1,364,695	-	-	1,364,695
Total Expenses	5,788,692	-	-	5,788,692
Increase in Net Assets	517,201	15,949	160,599	693,749
Net Assets - beginning	3,937,853	511,700	318,009	4,767,562
Net Assets - ending	$ 4,455,054	$ 527,649	$ 478,608	$ 5,461,311

See notes to financial statements.

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED JUNE 30, 2014

	PROGRAM SERVICES											
	Community Services	Mass 211	Labor Community Services	Community Impact	Women's Initiative Community Impact	Other Programs (Note 17)	Total Program Services	Admin. & Finance	Marketing	Fundraising	Total Support Services	Total
Salaries and related expenses.												
Salaries	$ 61,835	$ -	$ 69,548	$ 175,022	$ 25,769	$ 93,563	$ 425,737	$ 317,029	$ 64,855	$ 387,753	$ 769,637	$ 1,195,374
Payroll taxes	4,329	-	5,021	11,822	1,709	7,170	30,051	21,627	4,711	27,721	54,059	84,110
Health and other fringe benefits	9,691	-	14,981	39,524	5,317	7,098	76,611	56,292	13,869	80,589	150,750	227,361
Total salaries and related expenses	75,855	-	89,550	226,368	32,795	107,831	532,399	394,948	83,435	496,063	974,446	1,506,845
Other expenses:												
Professional fees and contract services	21,210	29,655	4,899	50,340	3,607	92,260	201,971	69,554	6,863	72,505	148,922	350,893
Directors and officers insurance	-	-	-	-	-	-	-	3,575	-	-	3,575	3,575
Supplies	2,407	-	19,754	954	194	912	24,221	5,874	573	3,246	9,693	33,914
Telephone	1,391	-	823	3,544	619	212	6,589	3,695	899	5,917	10,511	17,100
Postage	1,064	-	505	291	110	117	2,087	2,114	41	4,467	6,622	8,709
Occupancy (Note 11)	8,391	-	5,085	76,839	3,824	-	94,139	22,930	5,551	36,487	64,968	159,107
Promotion and publicity	2,786	-	284	881	297	3,151	7,399	2,025	3,868	19,053	24,946	32,345
Programs and events	16,703	-	-	-	9,697	18,012	44,412	-	17,439	26,055	43,494	87,906
Travel and professional development	686	-	1,620	13,789	1,053	9,010	26,158	8,524	467	11,555	20,546	46,704
Organization dues and subscriptions	290	-	-	-	114	651	1,055	2,151	377	36	2,564	3,619
Equipment rental and maintenance	991	-	601	4,926	452	-	6,970	5,445	656	4,620	10,721	17,691
Miscellaneous	-	-	-	-	-	-	-	513	71	321	905	905
Total other expenses	55,919	29,655	33,571	151,564	19,967	124,325	415,001	126,400	36,805	184,262	347,467	762,468
Total expenses before depreciation and national and state dues	131,774	29,655	123,121	377,932	52,762	232,156	947,400	521,348	120,240	680,325	1,321,913	2,269,313
Depreciation	1,884	-	1,142	2,589	860	266	6,741	5,126	1,247	8,212	14,585	21,326
National and state dues	5,008	-	3,035	6,876	2,283	-	17,202	13,582	3,313	21,876	38,771	55,973
Total expenses	$ 138,666	$ 29,655	$ 127,298	$ 387,397	$ 55,905	$ 232,422	$ 971,343	$ 540,056	$ 124,800	$ 710,413	$ 1,375,269	$ 2,346,612

See notes to financial statements.

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED JUNE 30, 2013

	PROGRAM SERVICES											
	Community Services	Mass 211	Labor Community Services	Community Impact	Women's Initiative Community Impact	Other Programs (Note 17)	Total Program Services	Admin. & Finance	Marketing	Fundraising	Total Support Services	Total
Salaries and related expenses:												
Salaries	$ 63,732	$ -	$ 67,330	$ 178,248	$ 26,667	$ 96,710	$ 432,687	$ 270,610	$ 75,936	$ 434,004	$ 780,550	$ 1,213,237
Payroll taxes	4,194	-	4,904	12,324	1,721	7,486	30,629	18,769	5,589	30,106	54,464	85,093
Health and other fringe benefits	9,534	-	13,696	76,387	5,095	11,118	115,830	45,683	14,791	81,980	142,454	258,284
Total salaries and related expenses	77,460	-	85,930	266,959	33,483	115,314	579,146	335,062	96,316	546,090	977,468	1,556,614
Other expenses												
Professional fees and contract services	17,927	42,756	504	39,584	420	74,286	175,477	60,854	1,876	67,992	130,722	306,199
Directors and officers insurance	-	-	-	-	-	-	-	3,575	-	-	3,575	3,575
Supplies	807	-	21,717	505	158	2,954	26,141	4,649	333	2,303	7,285	33,426
Telephone	2,775	-	755	2,586	630	313	7,059	3,413	1,207	4,868	9,488	16,547
Postage	1,525	-	250	314	44	258	2,391	2,192	109	4,821	7,122	9,513
Occupancy (Note 11)	17,268	-	4,849	70,201	4,044	-	96,362	22,329	7,623	31,150	61,102	157,464
Promotion and publicity	4,240	-	447	729	156	1,390	6,962	1,951	3,884	26,267	32,102	39,064
Programs and events	14,635	-	-	-	12,697	22,097	49,429	402	14,415	35,443	50,260	99,689
Travel and professional development	573	-	1,086	11,374	1,125	2,584	16,742	9,155	1,532	12,130	22,817	39,559
Organization dues and subscriptions	250	-	-	-	-	710	960	2,180	377	119	2,676	3,636
Equipment rental and maintenance	2,237	-	628	4,352	524	-	7,741	6,649	988	5,510	13,147	20,888
Miscellaneous	-	-	-	-	-	46	46	327	-	314	641	687
Total other expenses	62,237	42,756	30,236	129,645	19,798	104,638	389,310	117,676	32,344	190,917	340,937	730,247
Total expenses before depreciation and national and state dues	139,697	42,756	116,166	396,604	53,281	219,952	968,456	452,738	128,660	737,007	1,318,405	2,286,861
Depreciation	2,790	-	780	1,495	653	266	5,984	3,538	1,231	5,050	9,819	15,803
National and state dues	10,396	-	2,919	5,573	2,435	-	21,323	13,129	4,589	18,753	36,471	57,794
Total expenses	$ 152,883	$ 42,756	$ 119,865	$ 403,672	$ 56,369	$ 220,218	$ 995,763	$ 469,405	$ 134,480	$ 760,810	$ 1,364,695	$ 2,360,458

See notes to financial statements.

UNITED WAY OF CENTRAL MASSACHUSETTS, INC.

STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2014 AND 2013

	2014	2013
CASH FLOWS FROM OPERATING ACTIVITIES:		
Increase in net assets	$ 1,113,816	$ 693,749
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	21,326	15,803
Allowance for uncollectible pledges	36,030	(84,945)
Realized and unrealized net gain on investments	(1,044,517)	(419,012)
Changes in operating assets and liabilities:		
Pledges receivable	113,500	214,048
Accounts receivable and other assets	(26,174)	5,593
Accounts payable	3,835	(1,343)
Accrued expenses	(4,816)	(8,384)
Community impact grants payable	5,856	(9,002)
Women's initiative grants payable	(3,415)	3,443
Designations payable	28,483	(24,134)
Net cash provided by operating activities	243,924	385,816
CASH FLOWS FROM INVESTING ACTIVITIES:		
Acquisition of property and equipment	(16,474)	(2,901)
Acquisition of investments	(3,171,319)	(2,788,758)
Proceeds from sale of investments	3,443,055	2,705,843
Change in beneficial interest trust	(131,462)	(67,350)
Net cash provided by (used in) investing activities	123,800	(153,166)
NET INCREASE IN CASH AND CASH EQUIVALENTS	367,724	232,650
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	1,498,037	1,265,387
CASH AND CASH EQUIVALENTS, END OF YEAR	$ 1,865,761	$ 1,498,037

See notes to financial statements.

1. ORGANIZATION

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

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

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

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

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

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

	YEARS
Building and improvements	15 – 25
Equipment	3 – 5
Furniture and fixtures	10

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

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

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

The Organization receives services of volunteers in various aspects of its programs. The value of these services is not reflected in the accompanying financial statements since the value assigned to these services by the donating volunteers is not ascertainable and does not meet the recognition criteria of generally accepted accounting principles for non-profit organizations.

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

Advertising - Advertising costs are charged to operations as incurred. These costs were approximately $4,200 and $7,700 in 2014 and 2013, respectively.

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

Income tax benefits are recognized for income tax positions taken or expected to be taken in a tax return, only when it is determined that the income tax position will more-likely-than-not be sustained upon examination by taxing authorities. The Organization believes that income tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse effect on the Organization's financial condition, reported activity, or cash flows. The Organization is subject to audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Organization believes it is no longer subject to income tax examinations for years prior to 2010.

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

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Reclassification - Certain amounts in the June 30, 2013 financial statements have been reclassified to conform to the June 30, 2014 presentation.

Subsequent Events - Management has evaluated all subsequent events through October 14, 2014, the date the financial statements were available to be issued.

3. PLEDGES RECEIVABLE

Pledges receivable consists of the following at June 30:

	2014	2013
Campaign in 2013	$ 2,038,664	$ -
Campaign in 2012	947	2,189,141
	$ 2,039,611	$ 2,189,141

Pledges receivable are presented net of an allowance for uncollectible pledges of $371,866 and $335,836 in 2014 and 2013, respectively.

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

4. INVESTMENTS

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

	2014		
	Cost	Fair Value	Unrealized Appreciation
Mutual funds	$ 1,421,460	$ 1,462,278	$ 40,818
Equity	2,741,988	3,911,560	1,169,572
Limited partnership	180,000	217,488	37,488
	$ 4,343,448	$ 5,591,326	$ 1,247,878

	2013		
	Cost	Fair Value	Unrealized Appreciation
Mutual funds	$ 1,637,656	$ 1,681,013	$ 43,357
Equity	2,305,300	2,957,532	652,232
Limited partnership	180,000	180,000	-
	$ 4,122,956	$ 4,818,545	$ 695,589

4. INVESTMENTS (CONTINUED)

The Organization realized net gains of $482,509 and $237,100 from the sale of investments during 2014 and 2013, respectively. The Organization incurred investment custodial and advisory fees of $42,867 and $35,546 during 2014 and 2013, respectively.

5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

	2014	2013
Building and Improvements	$ 1,141,425	$ 1,141,425
Equipment	450,136	433,662
Furniture and Fixtures	204,916	204,916
	1,796,477	1,780,003
Accumulated Depreciation	(1,739,973)	(1,718,647)
	$ 56,504	$ 61,356

Depreciation expense amounted to $21,326 and $15,803 in 2014 and 2013, respectively.

6. LINE OF CREDIT

The Organization maintains a line of credit agreement with an available borrowing limit of $1,000,000. The line of credit bears interest at the British Bankers Association LIBOR Rate ("BBA LIBOR") plus 3.75% (3.91% at June 30, 2014). The line of credit expires in January 2015. There were no outstanding borrowings as of June 30, 2014 and 2013.

7. TEMPORARILY RESTRICTED NET ASSETS

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

	2014	2013
Future campaign revenue	$ 955	$ 3,520
Women's Initiative (WI)	49,493	77,499
Appreciation on WI Fund	67,351	29,603
Small capital grant awards	50,646	50,003
Investing in Girls Alliance (Note 17)	138,674	117,852
Worcester Education Collaborative (Note 17)	121,108	132,980
Ramp program	135,247	116,192
	$ 563,474	$ 527,649

8. PERMANENTLY RESTRICTED NET ASSETS

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

	2014	2013
UWCM endowment fund	$ 60,000	$ 60,000
Women's Initiative endowment fund	238,608	238,608
Cutler endowment fund	180,000	180,000
	$ 478,608	$ 478,608

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

9. NET ASSETS RELEASED FROM RESTRICTIONS

Temporarily restricted net assets were released for the following purposes:

	2014	2013
Future campaign revenue	$ 3,520	$ 28,110
Women's Initiative	514,310	542,422
Small capital grant awards	49,357	53,157
Investing in Girls Alliance	69,371	49,838
Worcester Education Collaborative	179,714	188,099
Main South Promise Neighborhood Partnership	-	16,500
Programs and events	180,199	169,848
	$ 996,471	$ 1,047,974

10. GROSS CAMPAIGN REVENUE

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

	Campaign 2014	Campaign 2013	Campaign 2012
June 30, 2014	$ 955	$ 5,958,025	$ 67,365
June 30, 2013	-	3,520	5,904,479
June 30, 2012	-	-	28,110
	$ 955	$ 5,961,545	$ 5,999,954

11. RENTAL INCOME

The Organization owns office condominium space which it does not currently occupy. The Organization did not receive any rental payments from this office space during 2014 and 2013. However, the Organization paid condominium fees and other rental expenses of $54,939 and $53,597 during 2014 and 2013, respectively. Starting in 2013, the Organization allowed an agency to use the office space free of charge to provide programs.

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

	2014	2013
Building and Improvements	$ 191,095	$ 191,095
Less: Accumulated Depreciation	(190,467)	(190,257)
	$ 628	$ 838

12. LEASE COMMITMENTS

The Organization has leased office equipment under three operating lease agreements which began in July and August 2012 requiring a combined monthly payment of $915. Two of the leases expire in July 2015 and the remaining lease expires December 2017. Future minimum lease payments under the operating leases for office equipment at June 30, 2014 are as follows:

	Amount
2015	$ 10,982
2016	2,280
2017	2,280
2018	380
Total minimum lease payments	$ 15,922

Total expense under the office equipment leases amounted to $10,983 and $11,144 in 2014 and 2013, respectively.

13. EMPLOYEE BENEFIT PLAN

The Organization maintains a contributory retirement plan covering all eligible employees. Each year the Organization at its discretion may make an employer contribution to the plan. The employer's contribution is determined annually, by the Board of Directors. The employer's contribution charged to expense was $33,122 and $32,101 in 2014 and 2013, respectively.

In addition, incorporated into the plan are the provisions of Section 401(k) of the Internal Revenue Code, which allows employees to contribute to their accounts on a pretax basis. The Organization may make a discretionary match contribution up to a maximum of 2% of employees' annual compensation. The match contribution for 2014 and 2013 was $17,466 and $17,575, respectively.

14. GREATER WORCESTER COMMUNITY FOUNDATION FUNDS

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

United Way of Central Massachusetts Fund

In August of 1987 the Organization established the United Way of Central Massachusetts Fund ("the Fund") at GWCF. The purpose of the Fund is to provide additional financial support for participating agencies of the Organization and to underwrite administrative costs of the Organization. The Fund consists of an amount contributed by the Organization, having a market value of $950,525 and $856,811 as of June 30, 2014 and 2013, respectively. In accordance with Financial Accounting Standards Board (FASB) *Accounting Standards Codification (ASC) 958-605, Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others,* the Organization's initial contribution to the Fund is reflected as an asset ("Beneficial interest in trust") and is included in unrestricted net assets on the Statement of Financial Position. Changes in market value of the Fund are recorded as an unrestricted change in beneficial interest in trust on the statement of activities.

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

On October 30, 2009, the Organization established the Women's Initiative Fund (the "WI Fund") in Honor of Lois B. Green at GWCF. The WI Fund shall be used for support of the charitable or educational purposes of the Women's Initiative of the UWCM and its affiliated agencies. The WI Fund shall be maintained by GWCF as a permanent endowment. The WI Fund consists of an amount contributed by the Organization, having a market value of $305,959 and $268,211 as of June 30, 2014 and 2013, respectively. In accordance with Financial Accounting Standards Board (FASB) *Accounting Standards Codification (ASC) 958-605, Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others,* the market value of the Organization's initial contribution to the WI Fund is reflected as an asset ("Beneficial interest in trust") and is included in permanently restricted net assets on the Statement of Financial Position. Changes in the market value of the WI Fund are recorded as a temporarily restricted change in beneficial interest in trust on the statement of activities.

The Arthur J. Remillard, Jr. Fund

The Arthur J. Remillard, Jr. Fund (the "AJR Fund") is a donor-designated fund established at GWCF to provide financial support to the Organization. A three-person advisory board, consisting of the chief executive officer, a current or past president of the Board of Directors of United Way of Central Massachusetts, Inc. and a current or past president of the Board of Directors of GWCF, determines the annual pledge to the Organization. During 2014 and 2013, the advisory board awarded the Organization a total of $21,457 and $23,239, respectively. As of and for the years ended June 30, 2014 and 2013, the AJR Fund had a fair market value of $619,419 and $566,317, respectively.

14. GREATER WORCESTER COMMUNITY FOUNDATION FUNDS (CONTINUED)

In addition to the original contribution by the Organization other significant contributions have since been received. The Organization and participating agencies are designated beneficiaries of these contributions, however variance power and ultimate control resides with GWCF board of directors. Accordingly, the market values of the contributions are reported as assets of GWCF. The market value of the assets included in the Fund and controlled by GWCF is equal to $2,744,087 at June 30, 2014 and $2,489,288 at June 30, 2013.

15. COMMUNITY IMPACT AND WOMEN'S INITIATIVE

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

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

16. FAIR VALUE MEASUREMENTS

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

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.
- Level 2: Inputs to the valuation method include: quoted prices for similar assets and liabilities in active markets, quoted prices for identical or similar assets and liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, or inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3: Inputs to the valuation method are unobservable and significant to the fair value measurement.

16. FAIR VALUE MEASUREMENTS (CONTINUED)

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2014 and 2013.

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

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

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

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

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

16. FAIR VALUE MEASUREMENTS (CONTINUED)

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

	2014			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Short-term bond	$ 1,462,278	$ -	$ -	$ 1,462,278
Equity securities:				
Consumer discretionary	261,290	-	-	261,290
Consumer staples	150,740	-	-	150,740
Energy	538,090	-	-	538,090
Financials	307,790	-	-	307,790
Health care	654,455	-	-	654,455
Industrials	1,127,029	-	-	1,127,029
Information technology	681,622	-	-	681,622
Materials	190,544	-	-	190,544
Total equity securities	3,911,560	-	-	3,911,560
Limited partnership	-	-	217,488	217,488
Beneficial interest in trusts	-	-	1,256,484	1,256,484
	$ 5,373,838	$ -	$ 1,473,972	$ 6,847,810

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

16. FAIR VALUE MEASUREMENTS (CONTINUED)

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

	2014 Beneficial Interests in Trusts	2014 Limited Partnership
Balance, beginning of year	$ 1,125,022	$ 180,000
Earnings and investment gains	163,441	37,488
Grants authorized	(26,008)	-
Administrative fees	(5,971)	-
Balance, end of year	$ 1,256,484	$ 217,488

	2013 Beneficial Interests in Trusts	2013 Limited Partnership
Balance, beginning of year	$ 1,057,672	$ -
Earnings and investment gains	105,754	-
Gifts received	1,567	180,000
Grants authorized	(33,944)	-
Administrative fees	(6,027)	-
Balance, end of year	$ 1,125,022	$ 180,000

17. FISCAL SPONSOR

The Organization serves as the fiscal sponsor for the Worcester Education Collaborative and the Investing in Girls Alliance. The Organization maintains legal and fiduciary responsibility for the employees and activities of these programs. Total revenue for these programs during 2014 and 2013 was $258,035 and $267,270, respectively. Total expense for these programs during 2014 was $249,085 of which $8,332 and $8,331 was allocated to administration and finance and fundraising, respectively. Total expense for these programs during 2013 was $237,937 of which $8,860 and $8,859 was allocated to administration and finance and fundraising, respectively. A total of $259,782 and $250,832 is included as temporarily restricted net assets for these programs as of June 30, 2014 and 2013.

18. CONTINGENCIES

The Organization owns and occupies condominium space in a building in Worcester, Massachusetts. The Organization is the largest owner of the condominium space, owning fifteen percent. Due to the age of the building, the Organization may be subject to special assessments to maintain and repair the building. As of June 30, 2014, the Organization is unable to estimate the extent of or dollar amount of future special assessments. The special assessments, when they occur, may have a material impact on the Organization's financial statements.

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

* * * * *

CEO/CFO Financial Statement Certification

CERTIFICATIONS

I hereby certify that:

1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2014.

2. Based on my knowledge, these financial statements do not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading.

3. Based on my knowledge, the financial statements and other financial information included in this report, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2014.

Timothy J. Garvin
President and Chief Executive Officer

Date 2/13/2015

James L. Hayes
Vice President, Finance and Operations

Date _____

Sub-Certification of Financial Statements

CERTIFICATIONS

I hereby certify that:

1. I have read the audited financial statements and related IRS Form 990 of the United Way of Central Massachusetts for the year ended June 30, 2014.

2. I have disclosed to our organization's auditors all relevant controls and procedures established to assure the accuracy and integrity of information provided by my team;

3. I have reported to the Audit Committee any known or observed deficiencies in internal controls or fraud involving management;

4. Based on my knowledge, the portions of the financial statements that are based on information originating from my team do not contain any untrue statement of a material fact or omit to state a material fact necessary to ensure that the statements made, in light of the circumstances under which such statements were made, are not misleading;

5. Based on my knowledge, the financial statements and other financial information included in this report that pertain to information originating from my team, fairly present, in all material respects, the financial condition, results of operations and cash flows of the United Way of Central Massachusetts as of and for the period ended June 30, 2014.

Timothy J. Garvin
President and Chief Executive Officer

Date 2/13/2015

James L. Hayes
Vice President, Finance and Operations

Date _____