

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization UNITED WAY WORLDWIDE		D Employer identification number 13-1635294
		FORMERLY UNITED WAY OF AMERICA		E Telephone number 703-836-7100
		Doing Business As		
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 701 NORTH FAIRFAX STREET		
City or town, state or country, and ZIP + 4 ALEXANDRIA, VA 22314		G Gross receipts \$ 66,434,169.		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: BRIAN A. GALLAGHER SAME AS C ABOVE		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)		H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.LIVEUNITED.ORG				
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1932	M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>MOBILIZE MILLIONS TO GIVE/ADVOCATE/VOLUNTEER-IMPROVING LIVES BY EDUCATION/INCOME/HEALTH.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of employees (Part V, line 2a)	5	304
	6 Total number of volunteers (estimate if necessary)	6	25
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	26,250.
b Net unrelated business taxable income from Form 990-T, line 34	7b	17,424.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	30,814,255.	30,950,654.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	32,778,418.	33,364,437.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,117,445.	602,353.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,358,572.	1,266,755.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	66,068,690.	66,184,199.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	19,999,716.	16,832,183.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)	21,603,187.	21,829,768.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 889,836.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	18,724,420.	18,409,758.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	60,327,323.	57,071,709.
19 Revenue less expenses. Subtract line 18 from line 12	5,741,367.	9,112,490.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	84,482,669.	109,317,622.
	22 Net assets or fund balances. Subtract line 21 from line 20	54,660,262.	87,090,868.
		29,822,407.	22,226,754.

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 _____
 ▶ ROBERT BERDELLE, CFO AND SENIOR VP
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 BDO USA, LLP 7101 WISCONSIN AVE., SUITE 800 BETHESDA, MD 20814-4827		EIN ▶	Phone no. ▶ (301) 654-4900

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
UNITED WAY IMPROVES LIVES BY MOBILIZING THE CARING POWER OF
COMMUNITIES TO ADVANCE THE COMMON GOOD, CREATING OPPORTUNITIES FOR A
BETTER LIFE FOR ALL BY FOCUSING ON LONG-LASTING CHANGES IN EDUCATION,
INCOME AND HEALTH, THE BUILDING BLOCKS OF A GOOD LIFE.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 12,464,198. including grants of \$ 4,681,636.) (Revenue \$ 242,559.)
COMMUNITY IMPACT: IN 2008 UNITED WAY ANNOUNCED NATIONAL GOALS FOR THE
COMMON GOOD: CUT IN HALF THE HIGH SCHOOL DROPOUT RATE; DECREASE BY HALF
THE NUMBER OF FINANCIALLY UNSTABLE WORKING FAMILIES; AND INCREASE BY A
THIRD THE NUMBER OF PEOPLE WITH HEALTHY LIFESTYLES. UNITED WAY'S FOCUS
ON EDUCATION FROM BIRTH TO 21 INCLUDES THE BORN LEARNING CAMPAIGN,
WHICH REACHED 6 MILLION PARENTS AND ENGAGED HUNDREDS OF BUSINESS
LEADERS AS EARLY EDUCATION CHAMPIONS. UNITED WAY PROMOTED FINANCIAL
STABILITY BY PARTNERING TO PROVIDE ACCESS TO EARNED INCOME TAX CREDITS,
FINANCIAL LITERACY TRAINING AND JOB TRAINING TO WORKING FAMILIES ACROSS
THE COUNTRY. UNITED WAY LEADS THE DRIVE FOR FULL IMPLEMENTATION OF
2-1-1, THE FREE PHONE NUMBER FOR HEALTH AND HUMAN SERVICE INFORMATION
NOW AVAILABLE TO 80 PERCENT OF THE US POPULATION.

4b (Code:) (Expenses \$ 8,578,129. including grants of \$ 262,842.) (Revenue \$)
BRAND LEADERSHIP: IN 2008 UNITED WAY INTRODUCED THE LIVE UNITED
NATIONAL BRAND CAMPAIGN, AN INVITATION TO INDIVIDUALS ACROSS ALL WALKS
OF LIFE TO GIVE, ADVOCATE AND VOLUNTEER TO HELP ACHIEVE THE NATIONAL
GOALS IN EDUCATION, FINANCIAL STABILITY AND HEALTH. RESULTS INCLUDE
\$4.2 BILLION RAISED ACROSS THE USA FROM MORE THAN 11 MILLION INDIVIDUAL
DONORS AS WELL AS BUSINESSES, FOUNDATIONS AND GOVERNMENT, AND 2.4
MILLION VOLUNTEERS MOBILIZED, INCLUDING 70,000 ACROSS ALL 50 STATES ON
JUNE 21, THE FIRST NAT'S NATIONAL WEB SITE, WWW.LIVEUNITED.ORG, PEOPLE
CAN FIND MORE THAN 37,000 VOLUNTEER OPPORTUNITIES AS WELL AS WAYS TO
GIVE AND ADVOCATE.

4c (Code:) (Expenses \$ 7,312,373. including grants of \$ 780,236.) (Revenue \$ 2,652,602.)
CENTER FOR COMMUNITY LEADERSHIP: UNITED WAY IS A NETWORK OF 1,280
SOCIAL-CHANGE INNOVATION LABS INSIDE LOCAL COMMUNITIES, TACKLING THE
MOST SERIOUS CHALLENGES IN EDUCATION, INCOME AND HEALTH AND SHARING
SUCCESSFUL STRATEGIES WITH FELLOW UNITED WAYS ACROSS THE COUNTRY. THE
CENTER FOR COMMUNITY LEADERSHIP TAKES THOSE BEST PRACTICES TO SCALE,
HELPING TO ACHIEVE THE NATIONAL GOALS OF FEWER HIGH SCHOOL DROPOUTS,
FEWER FINANCIALLY UNSTABLE WORKING FAMILIES, AND MORE HEALTHY YOUNG
PEOPLE AND ADULTS. ALMOST 700 UNITED WAYS, INCLUDING MORE THAN 12,000
STAFF AND VOLUNTEER LEADERS, COMPLETED THE UNITED WAY STANDARDS OF
EXCELLENCE SELF-ASSESSMENT, MEASURING THEMSELVES AGAINST RIGOROUS
STANDARDS THAT OUTLINE GUIDANCE AND DIRECTION FOR HOW A UNITED WAY
SHOULD OPERATE AS AN EFFECTIVE AND ACCOUNTABLE COMMUNITY IMPACT LEADER.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 21,261,803. including grants of \$ 10,896,079.) (Revenue \$ 427,857.)

4e Total program service expenses ▶ \$ 49,616,503. (Must equal Part IX, Line 25, column (B).)

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	125		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
	304		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
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)?		X
4b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and 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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966? N/A		
9b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
10	Section 501(c)(7) organizations. Enter: N/A		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter: N/A		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		X
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
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:		
15a	The organization's CEO, Executive Director, or top management official?	X	
15b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	X	
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?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **AL, AR, CA, CT, DC, FL, GA, IL, KS, KY, LA, ME**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROBERT BERDELLE - 703-836-7100**
701 NORTH FAIRFAX STREET, ALEXANDRIA, VA 22314

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

• 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
WILLIAM G. PARRETT CHAIR OF THE BOARD	1.00	X		X				0.	0.	0.
RODNEY E. SLATER IMMEDIATE PAST CHAIR	1.00	X						0.	0.	0.
ARLENE HOLT BAKER SECRETARY OF THE BOARD	1.00	X		X				0.	0.	0.
PHILLIP N. BALDWIN TREASURER AND CHAIR, FIN	1.00	X		X				0.	0.	0.
KAROL DEWULF NICKELL CHAIR, MEMBERSHIP	1.00	X						0.	0.	0.
DAVID BARNES CHAIR, AUDIT COMMITTEE	1.00	X						0.	0.	0.
ANN STALLARD CHAIR, EXECUTIVE COMPENS	1.00	X						0.	0.	0.
ARTHUR P. BELLIS AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
DAVID J. BRONCZEK AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
JOE BROWNE AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
GEORGE CLOONEY AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
JOHNNETTA B. COLE AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
PEGGY CONLON AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
ANTONIA CORTESE AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
JOHN J. DOONER, JR. AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
SALLY FERNANDEZ AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
THE RT. REV. CAROL J. GA AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
J. BARRY GRISWELL AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
MANUEL (MANNY) MIRABAL AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
JEFFREY RECHENBACH AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
ROBERTO E. SANTA MARIA AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
JOE SOLMONESE AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
CAROLYN WILLIAMS AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
RAUL YZAGUIRRE AT-LARGE BOARD MEMBER	1.00	X						0.	0.	0.
WILLIAM H. GATES EMERITUS BOARD MEMBER	1.00	X						0.	0.	0.
BRIAN A. GALLAGHER * PRESIDENT/CEO	48.00			X				982,768.	0.	54,372.
JOSEPH V HAGGERTY COO	48.00			X				346,803.	0.	47,097.
1b Total								3,112,396.	0.	278,853.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 43

	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		X
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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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.

(A) Name and business address	(B) Description of services	(C) Compensation
ERNST & YOUNG, LLP 8484 WESTPARK DRIVE, MCLEAN, VA 22102	AUDIT AND ANALYSIS	839,761.
MCCANN ERICKSON, INC 622 THIRD AVENUE, NEW YORK, NY 10017	ADVERTISING DEVELOPMENT	509,258.
LARSONALLEN, LLP 200 SOUTH 6TH STREET, MINNEAPOLIS, MN 55402	ACCOUNTING SUPPORT	435,008.
THE ADVERTISING COUNCIL 815 2ND AVENUE, NEW YORK, NY 10017	ADVERTISING DEVELOPMENT	420,578.
NFL FILMS ONE NFL PLAZA, MT. LAUREL, NJ 08054	ADVERTISING DEVELOPMENT	410,867.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 20

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a 331,558.					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 30,619,096.					
	g	Noncash contributions included in lines 1a-1f: \$	26,851.					
	h	Total. Add lines 1a-1f		30,950,654.				
	Program Service Revenue			Business Code				
2 a		DUES	900099	29,900,197.	29,900,197.			
b		COURSE TUITION	900099	2,652,602.	2,652,602.			
c		PROFESSIONAL FEES	900099	419,972.	419,972.			
d		SERVICE INCOME	900099	342,403.	342,403.			
e		CONFERENCE FEES	900099	49,263.	49,263.			
f		All other program service revenue						
g	Total. Add lines 2a-2f		33,364,437.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		852,323.			852,323.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		501,277.		26,250.	475,027.	
	6 a	Gross Rents	(i) Real	(ii) Personal				
		b	Less: rental expenses	174,531.				
		c	Rental income or (loss)	174,531.				
	d	Net rental income or (loss)			174,531.		174,531.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less: cost or other basis and sales expenses		249,970.			
		c	Gain or (loss)		-249,970.			
	d	Net gain or (loss)			-249,970.		-249,970.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b	Less: direct expenses	b				
		c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
b		Less: direct expenses	b					
c		Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a	445,085.					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory		445,085.	445,085.			
Miscellaneous Revenue			Business Code					
11 a	MISCELLANEOUS REVENUE	900099	145,862.	145,862.				
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		145,862.					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		66,184,199.	33,955,384.	26,250.	1,251,911.		

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) but are not required to complete columns (B), (C), and (D).

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 U.S. See Part IV, line 21	16,832,183.	16,832,183.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,112,396.	1,984,605.	1,127,791.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	15,097,332.	12,394,761.	2,192,443.	510,128.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	754,800.	608,770.	124,113.	21,917.
9 Other employee benefits	1,729,214.	1,394,666.	284,337.	50,211.
10 Payroll taxes	1,136,026.	916,242.	186,798.	32,986.
11 Fees for services (non-employees):				
a Management				
b Legal	706,481.	585,258.	114,673.	6,550.
c Accounting	607,386.	503,166.	98,589.	5,631.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	26,851.		26,851.	
g Other	7,302,661.	6,536,129.	693,380.	73,152.
12 Advertising and promotion	1,672,945.	1,385,888.	271,546.	15,511.
13 Office expenses	1,538,681.	1,166,374.	298,468.	73,839.
14 Information technology				
15 Royalties				
16 Occupancy	1,483,411.	948,435.	512,351.	22,625.
17 Travel	1,707,475.	1,586,929.	98,434.	22,112.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,879,321.	1,746,642.	108,341.	24,338.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	841,451.	666,572.	154,392.	20,487.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a SUBSCRIPTIONS	369,067.	220,128.	143,748.	5,191.
b				
c				
d				
e				
f All other expenses	274,028.	139,755.	129,115.	5,158.
25 Total functional expenses. Add lines 1 through 24f	57,071,709.	49,616,503.	6,565,370.	889,836.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	10,437,818.	1	13,187,045.
	2 Savings and temporary cash investments	19,056,925.	2	9,646,187.
	3 Pledges and grants receivable, net	27,199,137.	3	27,451,752.
	4 Accounts receivable, net	1,126,300.	4	2,139,840.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	249,726.	9	242,288.
	10a Land, buildings, and equipment: cost basis ...	10a 25,551,842.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 16,944,351.	7,123,520.	10c 8,607,491.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	12,075,189.	13	4,877,364.
	14 Intangible assets		14	250,000.
	15 Other assets. See Part IV, line 11	7,214,054.	15	42,915,655.
16 Total assets. Add lines 1 through 15 (must equal line 34)	84,482,669.	16	109,317,622.	
Liabilities	17 Accounts payable and accrued expenses	35,725,274.	17	33,133,132.
	18 Grants payable	63,357.	18	187,027.
	19 Deferred revenue	2,816,726.	19	2,731,937.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	2,940,500.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	16,054,905.	25	48,098,272.
	26 Total liabilities. Add lines 17 through 25	54,660,262.	26	87,090,868.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,239,980.	27	7,521,592.
	28 Temporarily restricted net assets	18,216,523.	28	14,705,162.
	29 Permanently restricted net assets	365,904.	29	0.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	29,822,407.	33	22,226,754.	
34 Total liabilities and net assets/fund balances	84,482,669.	34	109,317,622.	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 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?	X	
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?		X
b If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number	13-1635294
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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: (Please check only **one** organization.)

- 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)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,241,430.	27,722,124.	4,954,052.	30,814,255.	30,950,654.	104,682,515.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	10,241,430.	27,722,124.	4,954,052.	30,814,255.	30,950,654.	104,682,515.
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)						18,711,078.
6 Public Support. Subtract line 5 from line 4.						85,971,437.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	10,241,430.	27,722,124.	4,954,052.	30,814,255.	30,950,654.	104,682,515.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,057,715.	1,107,562.	2,119,889.	2,211,972.	1,973,216.	8,470,354.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	69,105.	139,574.	45,516.	33,985.		288,180.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	118,418.	218,959.	278,318.	221,042.	168,306.	1,005,043.
11 Total support. Add lines 7 through 10						114,446,092.
12 Gross receipts from related activities, etc. (see instructions)					12	156,492,835.

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 2008 (line 6, column (f) divided by line 11, column (f))	14	75.12 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	88.67 %
16a 33 1/3% support test - 2008. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2007. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

UNITED WAY WORLDWIDE
FORMERLY UNITED WAY OF AMERICA

Employer identification number

13-1635294

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization
 UNITED WAY WORLDWIDE
 FORMERLY UNITED WAY OF AMERICA

Employer identification number
 13-1635294

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2008

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ **To be completed by organizations described below.**
▶ **Attach to Form 990 or Form 990-EZ.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
--	--

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		48,000.													
c Total lobbying expenditures (add lines 1a and 1b)		48,000.													
d Other exempt purpose expenditures		57,610,994.													
e Total exempt purpose expenditures (add lines 1c and 1d)		57,658,994.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a		0.													
i Subtract line 1f from line 1c. Enter -0- if line f is more than line c		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	48,675.	400,000.	400,000.	48,000.	896,675.
d Grassroots non-taxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	675.	0.	0.	0.	675.

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization UNITED WAY WORLDWIDE
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

2 Complete lines 2a-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 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	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds?

Yes No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 XIV, 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, 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 XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's 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 XIV.
- 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 Trust, Escrow and Custodial Arrangements. Complete if 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 XIV and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if 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	365,904.				
b Contributions	32,621.				
c Investment earnings or losses	10,000.				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	408,525.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment ▶ 100.00 %
 - b** Permanent endowment ▶ _____ %
 - c** Term endowment ▶ _____ %

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

- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		2,102,080.		2,102,080.
b Buildings		12,995,019.	8,908,919.	4,086,100.
c Leasehold improvements		2,123,893.	1,146,531.	977,362.
d Equipment		7,079,034.	6,517,224.	561,810.
e Other		1,251,816.	371,677.	880,139.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				8,607,491.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	66,184,199.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	57,071,709.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	9,112,490.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-16,708,143.
9	Total adjustments (net). Add lines 4-8	9	-16,708,143.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-7,595,653.

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

1	Total revenue, gains, and other support per audited financial statements	1	66,211,050.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	26,851.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	26,851.
3	Subtract line 2e from line 1	3	66,184,199.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	66,184,199.

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

1	Total expenses and losses per audited financial statements	1	73,807,244.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	26,851.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	16,708,684.
e	Add lines 2a through 2d	2e	16,735,535.
3	Subtract line 2e from line 1	3	57,071,709.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	57,071,709.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

UWA ASSUMPTION OF EWAY DEBT: -3471500.

UWA ASSUMPTION OF EWAY ACCRUED PENSION: -828293.

ADJUST UWA'S TRUIST INVESTMENT TO MARKET: -7356370.

UWA FUNDING PER ASSET PURCHASE AGREEMENT: -375250.

PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST: -4677271.

FINANCIAL STATEMENT ADJ: 541.

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

UWA ASSUMPTION OF EWAY DEBT: 3471500.

UWA ASSUMPTION OF EWAY ACCRUED PENSION: 828293.

ADJUST UWA'S TRUIST INVESTMENT TO MARKET: 7356370.

UWA FUNDING PER ASSET PURCHASE AGREEMENT: 375250.

PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST: 4677271.

**Schedule F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.**

Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

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

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE	0	0	GRANTMAKING	GRANTS	165,439.
EAST ASIA	0	0	GRANTMAKING	GRANTS	24,110.
SOUTH AMERICA	0	0	GRANTMAKING	GRANTS	20,830.
CENTRAL AMERICA	0	0	GRANTMAKING	GRANTS	10,490.
Totals					220,869.

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: GRANTEES ARE REQUIRED TO SUBMIT A NARRATIVE

PROPOSAL AND BUDGET ABOUT THE PROJECT FOR WHICH FUNDING IS BEING

REQUESTED, IN ORDER TO BE CONSIDERED FOR FUNDING. WHEN FUNDS ARE

AWARDED, THE GRANTEE IS REQUIRED TO SIGN A BINDING CONTRACT WHICH

ESTABLISHES THE PURPOSE OF THE FUNDING AND REQUIRED THE SUBMISSION OF AN

INTERIM AND FINAL FINANCIAL REPORT, ALONG WITH THE NARRATIVE REPORTS,

DETAILING THE ACTUAL EXPENSES AND DESCRIBING THE ACTUAL USAGE OF THE

AWARDED FUNDS. THE FINANCIAL REPORTS MUST BE SIGNED BY AUTHORIZED

FINANCE PERSONNEL OF THE GRANTEE ORGANIZATION. THESE REPORTS ARE

REVIEWED BY THE DESIGNATED UWA MANAGER OVERSEEING THE PROJECT(S), AND

THEN COMPARED TO THE ORIGINAL PROPOSAL SUBMITTED WHEN THE FUNDING WAS

REQUESTED.

Multiple horizontal lines for supplemental information input.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.**
▶ **Attach to Form 990.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA Employer identification number
13-1635294

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) 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
UNITED WAYS OF ALABAMA 532 SOUTH PERRY ST. MONTGOMERY, AL 36104	63-0330778	501(C)3	92,250.	0.			HURRICANE RESPONSE & RECOVERY
UNITED WAYS OF ALABAMA 532 SOUTH PERRY ST. MONTGOMERY, AL 36104	63-0330778	501(C)3	28,175.	0.			HURRICANE RESPONSE & RECOVERY
UNITED WAY OF ANCHORAAAGE 701 W. 8TH AVENUE, #230 ANCHORAGE, AK 99501-3469	92-0027948	501(C)3	45,500.	0.			D DUKE-CHILD ABUSE PREVENT SB6
VALLEY OF THE SUN UNITED WAY P.O. BOX 10748 PHOENIX, AZ 85064-0748	86-0104419	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
VALLEY OF THE SUN UNITED WAY P.O. BOX 10748 PHOENIX, AZ 85064-0748	86-0104419	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
VALLEY OF THE SUN UNITED WAY P.O. BOX 10748 PHOENIX, AZ 85064-0748	86-0104419	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND

- 2** Enter total number of section 501(c)(3) and government organizations ▶ **205.**
- 3** Enter total number of other organizations ▶ **0.**

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: GRANTEES ARE REQUIRED TO SUBMIT A NARRATIVE PROPOSAL AND BUDGET ABOUT THE PROJECT FOR WHICH FUNDING IS BEING REQUESTED, IN ORDER TO BE CONSIDERED FOR FUNDING. WHEN FUNDS ARE AWARDED, THE GRANTEE IS REQUIRED TO SIGN A BINDING CONTRACT WHICH ESTABLISHES THE PURPOSE OF THE FUNDING AND REQUIRED THE SUBMISSION OF AN INTERIM AND FINAL FINANCIAL REPORT, ALONG WITH THE NARRATIVE REPORTS, DETAILING THE ACTUAL EXPENSES AND DESCRIBING THE ACTUAL USAGE OF THE AWARDED FUNDS. THE FINANCIAL REPORTS MUST BE SIGNED BY AUTHORIZED FINANCE PERSONNEL OF THE GRANTEE ORGANIZATION.

THESE REPORTS ARE REVIEWED BY THE DESIGNATED UWA MANAGER OVERSEEING THE

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY OF THE SUN UNITED WAY P.O. BOX 10748 PHOENIX, AZ 85064-0748	86-0104419	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
VALLEY OF THE SUN UNITED WAY P.O. BOX 10748 PHOENIX, AZ 85064-0748	86-0104419	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF TUCSON AND SOUTHERN ARIZONA - P.O. BOX 86750 - TUCSON, AZ 85754-6750	86-0098932	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF TUCSON AND SOUTHERN ARIZONA - P.O. BOX 86750 - TUCSON, AZ 85754-6750	86-0098932	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF TUCSON AND SOUTHERN ARIZONA - P.O. BOX 86750 - TUCSON, AZ 85754-6750	86-0098932	501(C)3	700.	0.			FAMILY, FRIEND & NEIGHBOR-CASEY
UNITED WAY OF THE NAVAJO NATION P.O. BOX 309 WINDOW ROCK, AZ 86515-0309	94-2819114	501(C)3	20,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE NAVAJO NATION P.O. BOX 309 WINDOW ROCK, AZ 86515-0309	94-2819114	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF FRESNO COUNTY 4949 EAST KINGS CANYON RD. FRESNO, CA 93727-3812	94-1156514	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF FRESNO 4949 EAST KINGS CANYON RD. FRESNO, CA 93727-3812	94-1156514	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER LOS ANGELES 523 W. 6TH STREET LOS ANGELES, CA 90014-1217	95-2274801	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
5160UNITED WAY INC. 523 W. 6TH STREET LOS ANGELES, CA 90014-1217	95-2274801	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
5160UNITED WAY INC. 523 W. 6TH STREET LOS ANGELES, CA 90014-1217	95-2274801	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
5160UNITED WAY INC. 523 W. 6TH STREET LOS ANGELES, CA 90014-1217	95-2274801	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
5160UNITED WAY INC. 523 W. 6TH STREET LOS ANGELES, CA 90014-1217	95-2274801	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF THE INLAND VALLEYS 6215 RIVER CREST DR. SUITE B RIVERSIDE, CA 92507-0703	95-1742174	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
5360UNITED WAY OF THE INL 6215 RIVER CREST DR. SUITE B RIVERSIDE, CA 92507-0703	95-1742174	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations **3**

3 Enter total number of other organizations **3**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE CALIFORNIA CAPITAL REGION - 8912 VOLUNTEER LANE SUITE 200 - SACRAMENTO, CA 95826-3221	94-1225382	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SAN DIEGO COUNTY 4699 MURPHY CANYON ROAD SAN DIEGO, CA 92123	95-2213995	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SAN DIEGO COUNTY 4699 MURPHY CANYON ROAD SAN DIEGO, CA 92123	95-2213995	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE BAY AREA 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105	94-1312348	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE BAY AREA 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105	94-1312348	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE BAY AREA 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105	94-1312348	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF THE BAY AREA 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105	94-1312348	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF THE BAY AREA 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105	94-1312348	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF

2 Enter total number of Section 501(c)(3) and government organizations **3**

3 Enter total number of other organizations **3**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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**Open to Public
Inspection**

Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORANGE COUNTY UNITED WAY 18012 MITCHELL AVENUE SOUTH IRVINE, CA 92614-6008	33-0047994	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
ORANGE COUNTY UNITED WAY 18012 MITCHELL AVENUE SOUTH IRVINE, CA 92614-6008	33-0047994	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SAN JOAQUIN COUNTY P.O. BOX 1585 STOCKTON, CA 95201-3085	94-1279805	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
5475UNITED WAY OF SAN JOA P.O. BOX 1585 STOCKTON, CA 95201-3085	94-1279805	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF VENTURA COUNTY 1317 DEL NORTE RD. SUITE 100 CAMARILLO, CA 93010-8483	95-1945833	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
5495UNITED WAY OF VENTURA 1317 DEL NORTE RD. SUITE 100 CAMARILLO, CA 93010-8483	95-1945833	501(C)3	10,000.	0.			EITC - EXPANSION PROJECT
MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211-3907	84-0404235	501(C)3	5,000.	0.			SUCCESS BY 6 - BUFFETT
MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211-3907	84-0404235	501(C)3	7,500.	0.			SB6 BUFFETT - YEAR IV

2 Enter total number of Section 501(c)(3) and government organizations **35**

3 Enter total number of other organizations **35**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211-3907	84-0404235	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211-3907	84-0404235	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
MILE HIGH UNITED WAY 2505 18TH ST. DENVER, CO 80211-3907	84-0404235	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF CENTRAL AND NORTHEASTERN CONNECTICUT - 30 LAUREL STREET - HARTFORD, CT 06106-1374	06-0646653	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF CENTRAL AND NORTHEASTERN CONNECTICUT - 30 LAUREL STREET - HARTFORD, CT 06106-1374	06-0646653	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF DELAWARE, INC 625 N. ORANGE ST. WILMINGTON, DE 19801-2296	51-0073399	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF DELAWARE, INC 625 N. ORANGE ST. WILMINGTON, DE 19801-2296	51-0073399	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE NATIONAL CAPITAL AREA - 1725 I STREET, NW, SUITE 200 - WASHINGTON, DC 20006	53-0234290	501(C)3	20,000.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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2008

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Name of the organization **UNITED WAY WORLDWIDE**
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Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE NATIONAL CAPITAL AREA - 8391 OLD COURTHOUSE RD, SUITE 200 - VIENNA, VA 22182	53-0234290	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
11000UNITED WAY OF FLORIDA 307B E. 7TH AVE. TALLAHASSEE, FL 32303-5520	59-2104175	501(C)3	10,000.	0.			SUCCESS BY 6 - BUFFETT
11000UNITED WAY OF FLORIDA 307B E. 7TH AVE. TALLAHASSEE, FL 32303-5520	59-2104175	501(C)3	6,500.	0.			SB6 BUFFETT - YEAR IV
UNITED WAY OF NORTHEAST FLORIDA, INC. - PO BOX 41428 - JACKSONVILLE, FL 32203-1428	59-0637825	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF NORTHEAST FLORIDA, INC. - PO BOX 41428 - JACKSONVILLE, FL 32203-1428	59-0637825	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF MIAMI-DADE 3250 SW THIRD AVENUE MIAMI, FL 33129-2712	59-0830840	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF MIAMI-DADE 3250 SW THIRD AVENUE MIAMI, FL 33129-2712	59-0830840	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF MIAMI-DADE 3250 SW THIRD AVENUE MIAMI, FL 33129-2712	59-0830840	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND

2 Enter total number of Section 501(c)(3) and government organizations **37**

3 Enter total number of other organizations **37**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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2008

**Open to Public
Inspection**

Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF MIAMI-DADE 3250 SW THIRD AVENUE MIAMI, FL 33129-2712	59-0830840	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF TAMPA BAY, INC. 5201 W. KENNEDY BLVD., SUITE 600 TAMPA, FL 33609-1820	59-3725701	501(C)3	10,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF PALM BEACH COUNTY 2600 QUANTUM BOULEVARD BOYNTON BEACH, FL 33426	59-0683258	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF PALM BEACH COUNTY 2600 QUANTUM BOULEVARD BOYNTON BEACH, FL 33426	59-0683258	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF PALM BEACH COUNTY 2600 QUANTUM BOULEVARD BOYNTON BEACH, FL 33426	59-0683258	501(C)3	1,240.	0.			GLOBAL STRATEGIES
UNITED WAY OF METROPOLITAN ATLANTA 100 EDGEWOOD AVE. NE ATLANTA, GA 30303-3026	58-0566194	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN ATLANTA 100 EDGEWOOD AVE. NE ATLANTA, GA 30303-3026	58-0566194	501(C)3	20,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN ATLANTA 100 EDGEWOOD AVE. NE ATLANTA, GA 30303-3026	58-0566194	501(C)3	55,000.	0.			D DUKE-CHILD ABUSE PREVENT SB6

2 Enter total number of Section 501(c)(3) and government organizations **▶**

3 Enter total number of other organizations **▶**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
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**Continuation Sheet for Schedule I (Form 990)
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Employer identification number
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	30,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	23,997.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF METROPOLITAN CHICAGO 560 WEST LAKE STREET CHICAGO, IL 60661	30-0200478	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF JOHNSON COUNTY P.O. BOX 153 FRANKLIN, IN 46131-0153	35-1082600	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF THE WABASH VALLEY, INC. - P.O. BOX 3094 - TERRE HAUTE, IN 47803-0094	35-1008531	501(C)3	12,720.	0.			2008 MIDWEST FLOODS-EXPENSE

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR VALLEY UNITED WAY 425 CEDAR STREET, SUITE 300 WATERLOO, IA 50701	42-0801846	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
BURLINGTON/W. BURLINGTON AREA UNITED WAY - 218 NORTH 3RD ST., SUITE 217 - BURLINGTON, IA 52601-5320	42-0680362	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF EAST CENTRAL IOWA 1030 5TH AVE., SE, SUITE 100 CEDAR RAPIDS, IA 52403-2479	42-0861239	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF CENTRAL IOWA 1111 NINTH ST. SUITE 100 DES MOINES, IA 50314-2527	42-0680425	501(C)3	10,000.	0.			CAMPUS & YOUNG ADULT ENGAGEMNT
UNITED WAY OF CENTRAL IOWA 1111 NINTH ST. SUITE 100 DES MOINES, IA 50314-2527	42-0680425	501(C)3	516.	0.			FAMILY, FRIEND & NEIGHBOR-CASEY
UNITED WAY OF JOHNSON COUNTY, INC. 1150 5TH STREET SUITE 290 CORAVILLE, IA 52241-2933	42-6062055	501(C)3	10,000.	0.			CAMPUS & YOUNG ADULT ENGAGEMNT
WAVERLY-SHELL ROCK AREA UNITED WAY, INC. - P.O. BOX 271 - WAVERLY, IA 50677-0271	42-1098807	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF GREATER TOPEKA P.O. BOX 4188 TOPEKA, KS 66604-0188	48-0561978	501(C)3	5,000.	0.			SUCCESS BY 6 - BUFFETT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

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Department of the Treasury
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2008

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Inspection**

Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER TOPEKA P.O. BOX 4188 TOPEKA, KS 66604-0188	48-0561978	501(C)3	4,730.	0.			SB6 BUFFETT - YEAR IV
UNITED WAY OF SOUTHWEST LOUISIANA, INC. - 715 RYAN ST. SUITE 102 - LAKE CHARLES, LA 70601-4242	72-0456901	501(C)3	59,600.	0.			ALTERNATIVE SPRING BREAK
UNITED WAY OF SOUTHWEST LOUISIANA, INC. - 715 RYAN ST. SUITE 102 - LAKE CHARLES, LA 70601-4242	72-0456901	501(C)3	53,507.	0.			CAMPUS & YOUNG ADULT ENGAGEMNT
UNITED WAY OF SOUTHWEST LOUISIANA, INC. - 715 RYAN ST. SUITE 102 - LAKE CHARLES, LA 70601-4242	72-0456901	501(C)3	700.	0.			FAMILY, FRIEND & NEIGHBOR-CASEY
UNITED WAY FOR THE GREATER NEW ORLEANS AREA - 2515 CANAL STREET - NEW ORLEANS, LA 70119-6435	72-0471369	501(C)3	144,635.	0.			HURRICANE RESPONSE & RECOVERY
UNITED WAY FOR THE GREATER NEW ORLEANS AREA - 2515 CANAL STREET - NEW ORLEANS, LA 70119-6435	72-0471369	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY FOR THE GREATER NEW ORLEANS AREA - 2515 CANAL STREET - NEW ORLEANS, LA 70119-6435	72-0471369	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY FOR THE GREATER NEW ORLEANS AREA - 2515 CANAL STREET - NEW ORLEANS, LA 70119-6435	72-0471369	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF

2 Enter total number of Section 501(c)(3) and government organizations **▶**

3 Enter total number of other organizations **▶**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

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Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF CENTRAL MARYLAND P.O. BOX 1576 BALTIMORE, MD 21203-1576	52-0591543	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF CENTRAL MARYLAND P.O. BOX 1576 BALTIMORE, MD 21203-1576	52-0591543	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF CENTRAL MARYLAND P.O. BOX 1576 BALTIMORE, MD 21203-1576	52-0591543	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF CENTRAL MARYLAND P.O. BOX 1576 BALTIMORE, MD 21203-1576	52-0591543	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF CENTRAL MARYLAND P.O. BOX 1576 BALTIMORE, MD 21203-1576	52-0591543	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF MASSACHUSETTS BAY AND MERRIMACK VALLEY - 51 SLEEPER STREET - BOSTON, MA 02210	04-2382233	501(C)3	20,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF MASSACHUSETTS BAY AND MERRIMACK VALLEY - 51 SLEEPER STREET - BOSTON, MA 02210	04-2382233	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	12,700.	0.			ALTERNATIVE SPRING BREAK

2 Enter total number of Section 501(c)(3) and government organizations **42**

3 Enter total number of other organizations **2**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	6,641.	0.			CAMPUS & YOUNG ADULT ENGAGEMNT
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 1212 GRISWOLD ST. - DETROIT, MI 48226-1899	20-3099071	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF SOUTHWEST MICHIGAN P.O. BOX 807 BENTON HARBOR, MI 49023-0807	38-1358411	501(C)3	11,009.	0.			ALLIANCE FOR YOUTH
UNITED WAY OF SOUTH MISSISSIPPI, INC. - P.O. BOX 2128 - GULFPORT, MS 39505-2128	64-0826356	501(C)3	19,440.	0.			ALTERNATIVE SPRING BREAK

2 Enter total number of Section 501(c)(3) and government organizations **43**

3 Enter total number of other organizations **3**

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(Form 990)**

Department of the Treasury
Internal Revenue Service

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Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF SOUTH MISSISSIPPI, INC. - P.O. BOX 2128 - GULFPORT, MS 39505-2128	64-0826356	501(C)3	33,830.	0.			CAMPUS & YOUNG ADULT ENGAGEMNT
UNITED WAY OF SOUTHEAST MISSISSIPPI, INC. - P.O. BOX 1648 - HATTIESBURG, MS 39403-1648	64-0410475	501(C)3	150,000.	0.			HURRICANE RESPONSE & RECOVERY
UNITED WAY OF THE MARK TWAIN AREA P.O. BOX 81 HANNIBAL, MO 63401-0081	43-0716604	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	20,000.	0.			READY BY 21-ACHIEVE POTENTIAL
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND

2 Enter total number of Section 501(c)(3) and government organizations **▶**

3 Enter total number of other organizations **▶**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
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Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER KANSAS CITY 1080 WASHINGTON ST. KANSAS CITY, MO 64105-2216	44-0545812	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF GREATER ST. LOUIS, INC. - 910 NORTH 11TH STREET - SAINT LOUIS, MO 63101	43-0714167	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER ST. LOUIS, INC. - 910 NORTH 11TH STREET - SAINT LOUIS, MO 63101	43-0714167	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE
UNITED WAY OF GREATER ST. LOUIS 910 NORTH 11TH STREET SAINT LOUIS, MO 63101	43-0714167	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE OZARKS 320 N. JEFFERSON SPRINGFIELD, MO 65806-1109	44-0552047	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE OZARKS 320 N. JEFFERSON SPRINGFIELD, MO 65806-1109	44-0552047	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHERN NEVADA 1660 EAST FLAMINGO ROAD LAS VEGAS, NV 89119-5254	88-0071328	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHERN NEVADA 1660 EAST FLAMINGO ROAD LAS VEGAS, NV 89119-5254	88-0071328	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations **5**

3 Enter total number of other organizations **5**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF MORRIS COUNTY P.O. BOX 1948 MORRISTOWN, NJ 07962-1948	22-1487247	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF NEW YORK STATE 155 WASHINGTON AVE. ALBANY, NY 12210-2329	14-1705108	501(C)3	30,000.	0.			EITC - EXPANSION PROJECT
34000UNITED WAY OF NEW YOR 155 WASHINGTON AVE. ALBANY, NY 12210-2329	14-1705108	501(C)3	30,000.	0.			EITC - EXPANSION PROJECT
34000UNITED WAY OF NEW YOR 155 WASHINGTON AVE. ALBANY, NY 12210-2329	14-1705108	501(C)3	14,000.	0.			SB6 BUFFETT - YEAR IV
34370UNITED WAY OF NEW YOR 2 PARK AVENUE 2ND FLOOR NEW YORK, NY 10016-5605	13-2617681	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF NEW YORK CITY 2 PARK AVENUE NEW YORK, NY 10016-1501	13-2617681	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
34375UNITED WAY OF NEW YOR 2 PARK AVENUE NEW YORK, NY 10016-1501	13-2617681	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
34370UNITED WAY OF NEW YOR 2 PARK AVENUE 2ND FLOOR NEW YORK, NY 10016-5605	13-2617681	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
34370UNITED WAY OF NEW YOR 2 PARK AVENUE 2ND FLOOR NEW YORK, NY 10016-5605	13-2617681	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF CENTRAL CAROLINAS, INC. - P.O. BOX 601942 - CHARLOTTE, NC 28260-1942	56-0529948	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF CENTRAL CAROLINAS, INC. - P.O. BOX 601942 - CHARLOTTE, NC 28260-1942	56-0529948	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER HIGH POINT, INC. - 201 CHURCH AVE. - HIGH POINT, NC 27262-4805	56-0547486	501(C)3	49,500.	0.			D DUKE-CHILD ABUSE PREVENT SB6
UNITED WAY OF CENTRAL OKLAHOMA, INC. - 1315 N. BROADWAY PLACE - OKLAHOMA CITY, OK 73101-0837	73-0589829	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF CENTRAL OKLAHOMA, INC. - 1315 N. BROADWAY PLACE - OKLAHOMA CITY, OK 73101-0837	73-0589829	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF CENTRAL OKLAHOMA, INC. - 1315 N. BROADWAY PLACE - OKLAHOMA CITY, OK 73101-0837	73-0589829	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 S.W. 11TH AVE. SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations **47**

3 Enter total number of other organizations **7**

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(Form 990)**

Department of the Treasury
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UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 S.W. 11TH AVE. SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 S.W. 11TH AVE. SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 S.W. 11TH AVE. SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 S.W. 11TH AVE. SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF SOUTHEASTERN PENNSYLVANIA - 7 BENJAMIN FRANKLIN PKWY. - PHILADELPHIA, PA 19103-1208	23-1556045	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHEASTERN PENNSYLVANIA - 7 BENJAMIN FRANKLIN PKWY. - PHILADELPHIA, PA 19103-1208	23-1556045	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHEASTERN PENNSYLVANIA - 7 BENJAMIN FRANKLIN PKWY. - PHILADELPHIA, PA 19103-1208	23-1556045	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF SOUTHEASTERN PENNSYLVANIA - 7 BENJAMIN FRANKLIN PKWY. - PHILADELPHIA, PA 19103-1208	23-1556045	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF

2 Enter total number of Section 501(c)(3) and government organizations **48**

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE MIDLANDS P.O. BOX 152 COLUMBIA, SC 29202-0152	57-0314396	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF THE MIDLANDS P.O. BOX 152 COLUMBIA, SC 29202-0152	57-0314396	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN NASHVILLE - P.O. BOX 280420 - NASHVILLE, TN 37228-0420	62-0533104	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN NASHVILLE - P.O. BOX 280420 - NASHVILLE, TN 37228-0420	62-0533104	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
THE UNITED WAYS OF TEXAS 1122 COLORADO, SUITE 102 AUSTIN, TX 78701	74-1618608	501(C)3	30,000.	0.			EITC - EXPANSION PROJECT
THE UNITED WAYS OF TEXAS 1122 COLORADO, SUITE 102 AUSTIN, TX 78701	74-1618608	501(C)3	30,000.	0.			EITC - EXPANSION PROJECT
THE UNITED WAYS OF TEXAS 1122 COLORADO, SUITE 102 AUSTIN, TX 78701	74-1618608	501(C)3	71,985.	0.			2008 HURRICANE RECOVERY FUND
UNITED WAY CAPITAL AREA 2000 E. MLK JR. BLVD. AUSTIN, TX 78702	74-1193439	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations **49**

3 Enter total number of other organizations

**SCHEDULE I-1
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UNITED WAY CAPITAL AREA 2000 E. MLK JR. BLVD. AUSTIN, TX 78702	74-1193439	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHERN CAMERON COUNTY - P.O. BOX 511 - BROWNSVILLE, TX 78522-0511	74-1241385	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHERN CAMERON COUNTY - P.O. BOX 511 - BROWNSVILLE, TX 78522-0511	74-1241385	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SOUTHERN CAMERON COUNTY - P.O. BOX 511 - BROWNSVILLE, TX 78522-0511	74-1241385	501(C)3	42,000.	0.			D DUKE-CHILD ABUSE PREVENT SB6
UNITED WAY OF METROPOLITAN DALLAS, INC. - 1800 N. LAMAR - DALLAS, TX 75202	75-6005352	501(C)3	5,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF METROPOLITAN DALLAS, INC. - 1800 N. LAMAR - DALLAS, TX 75202	75-6005352	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF METROPOLITAN DALLAS, INC. - 1800 N. LAMAR - DALLAS, TX 75202	75-6005352	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF METROPOLITAN DALLAS, INC. - 1800 N. LAMAR - DALLAS, TX 75202	75-6005352	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF

2 Enter total number of Section 501(c)(3) and government organizations

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13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF EL PASO COUNTY P.O. BOX 3488 EL PASO, TX 79923	74-1291051	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF EL PASO COUNTY P.O. BOX 3488 EL PASO, TX 79923	74-1291051	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF EL PASO COUNTY P.O. BOX 3488 EL PASO, TX 79923	74-1291051	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF EL PASO COUNTY P.O. BOX 3488 EL PASO, TX 79923	74-1291051	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF EL PASO COUNTY P.O. BOX 3488 EL PASO, TX 79923	74-1291051	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF METROPOLITAN TARRANT COUNTY - PO BOX 4448 - FORT WORTH, TX 76164-0448	75-0858360	501(C)3	200,000.	0.			HURRICANE RESPONSE & RECOVERY
UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	74-1167964	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	74-1167964	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	74-1167964	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	74-1167964	501(C)3	2,000.	0.			JC PENNEY AFTERSCHOOL FUND
UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	74-1167964	501(C)3	47,000.	0.			AFTER SCHOOL PRGM 08-09 JCPASF
UNITED WAY OF SAN ANTONIO AND BEXAR COUNTY - P.O. BOX 898 - SAN ANTONIO, TX 78293-0898	74-1272381	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SAN ANTONIO AND BEXAR COUNTY - P.O. BOX 898 - SAN ANTONIO, TX 78293-0898	74-1272381	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF SAN ANTONIO AND BEXAR COUNTY - P.O. BOX 898 - SAN ANTONIO, TX 78293-0898	74-1272381	501(C)3	53,000.	0.			D DUKE-CHILD ABUSE PREVENT SB6
UNITED WAY OF SAN ANTONIO AND BEXAR COUNTY - P.O. BOX 898 - SAN ANTONIO, TX 78293-0898	74-1272381	501(C)3	700.	0.			FAMILY, FRIEND & NEIGHBOR-CASEY
UNITED WAY OF SOUTH HAMPTON ROADS P.O. BOX 41069 NORFOLK, VA 23541-1069	54-0506322	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF SOUTH HAMPTON ROADS 6477 COLLEGE PARK SQUARE #212 VIRGINIA BEACH, VA 23464	54-0506322	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	20,000.	0.			READY BY 21-ACHIEVE POTENTIAL
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	10,000.	0.			SUCCESS BY 6 - BUFFETT
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	7,500.	0.			SB6 BUFFETT - YEAR IV
UNITED WAY OF GREATER RICHMOND & PETERSBURG - 2001 MAYWILL STREET - RICHMOND, VA 23230	23-7375346	501(C)3	700.	0.			FAMILY, FRIEND & NEIGHBOR-CASEY
UNITED WAY OF SNOHOMISH COUNTY 3120 MCDUGALL AVE., SUITE 200 EVERETT, WA 98201-4433	91-0606507	501(C)3	5,000.	0.			SUCCESS BY 6 - BUFFETT

2 Enter total number of Section 501(c)(3) and government organizations **5**

3 Enter total number of other organizations **3**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE, WA 98104-1702	91-0565555	501(C)3	15,000.	0.			EITC - EXPANSION PROJECT
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE, WA 98104-1702	91-0565555	501(C)3	12,500.	0.			EITC - EXPANSION PROJECT
UNITED WAYS OF WASHINGTON 2150 N. 107TH ST, SUITE 205 SEATTLE, WA 98133-9009	91-1055031	501(C)3	55,000.	0.			D DUKE-CHILD ABUSE PREVENT SB6
UNITED WAYS OF WASHINGTON 2150 N. 107TH ST, SUITE 205 SEATTLE, WA 98133-9009	91-1055031	501(C)3	15,000.	0.			D DUKE-CHILD ABUSE PREVENT SB6
UNITED WAYS OF WASHINGTON 2150 N. 107TH ST, SUITE 205 SEATTLE, WA 98133-9009	91-1055031	501(C)3	4,000.	0.			SB6 BUFFETT - YEAR IV
UNITED WAY OF DANE COUNTY, INC. P.O. BOX 7548 MADISON, WI 53707-7548	39-0817532	501(C)3	10,000.	0.			CAMPUS & YOUNG ADULT ENGAGEMENT
UNITED WAY INTERNATIONAL 701 N. FAIRFAX STREET ALEXANDRIA, VA 22314	23-7424837	501(C)3	7,392.	0.			CENTER FOR COMM LDRSHP - ADMIN
UNITED WAY INTERNATIONAL 701 N. FAIRFAX STREET ALEXANDRIA, VA 22314	23-7424837	501(C)3	30,000.	0.			GLOBAL STRATEGIES

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA UNIVERSITY 550 WEST NORTH ST. INDIANAPOLIS, IN 46202-3612	35-6001673	501(C)3	362,500.	0.			CENTER ON PHILANTHROPY - LILLY
INDIANA UNIVERSITY 550 WEST NORTH ST. INDIANAPOLIS, IN 46202-3612	35-6001673	501(C)3	362,500.	0.			CENTER ON PHILANTHROPY - LILLY
UNITED WAY RETIREES ASSOCIATION 701 N. FAIRFAX STREET ALEXANDRIA, VA 22314	54-2026707	501(C)3	25,000.	0.			COO - ADMIN
LUTHERAN DISASTER RESPONSE P.O. BOX 367 BAYOU LABATRE, AL 36509	43-0652650	501(C)3	82,500.	0.			HURRICANE RESPONSE & RECOVERY
CATHOLIC SOCIAL SERVICES 1220 AYCOCK STREET HOUMA, LA 70360	99-8222222	501(C)3	215,000.	0.			HURRICANE RESPONSE & RECOVERY
YMCA OF PORT ARTHUR 6760 9TH AVENUE PORT ARTHUR, TX 77642	74-1143027	501(C)3	216,000.	0.			HURRICANE RESPONSE & RECOVERY
YMCA OF GREATER NEW ORLEANS 1215 PRYTANIA ST., SUITE 371 NEW ORLEANS, LA 70130	72-0423890	501(C)3	78,750.	0.			HURRICANE RESPONSE & RECOVERY
VOLUNTEERS OF AMERICA 4152 CANAL STREET NEW ORLEANS, LA 70119	72-0709750	501(C)3	125,000.	0.			HURRICANE RESPONSE & RECOVERY

2 Enter total number of Section 501(c)(3) and government organizations **5**

3 Enter total number of other organizations **5**

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **UNITED WAY WORLDWIDE**
FORMERLY UNITED WAY OF AMERICA

Employer identification number
13-1635294

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODWILL EASTER SEALS 2448 GORDON SMITH DRIVE MOBILE, AL 36695	63-0363472	501(C)3	14,670.	0.			HURRICANE RESPONSE & RECOVERY
AMERICAN RED CROSS P.O. BOX 4514 BILOXI, MS 39535	64-0466786	501(C)3	92,250.	0.			HURRICANE RESPONSE & RECOVERY
AMERICAN RED CROSS P.O. BOX 4514 BILOXI, MS 39535	64-0466786	501(C)3	28,175.	0.			HURRICANE RESPONSE & RECOVERY
HABITAT FOR HUMANITY INTERNATIONAL 121 HABITAT STREET ATLANTA, GA 31709-3498	91-1914868	501(C)3	250,000.	0.			HURRICANE RESPONSE & RECOVERY
TURNING THE PAGE 1010 VERMONT AVENUE, NW, SUITE 915 WASHINGTON, DC 20005	52-2081934	501(C)3	1,500.	0.			TECH ASSISTANCE & TRAINING
HASHOO FOUNDATION USA 333 CLAY STREET, SUITE 4980 HOUSTON, TX 77002	20-0748173	501(C)3	157,361.	0.			ISLAMABAD MARRIOTT FUND
CENTRAL IOWA RECOVERY 2116 GRAND AVENUE DES MOINES, IA 50312	53-0196605	501(C)3	20,000.	0.			2008 MIDWEST FLOODS-EXPENSE

2 Enter total number of Section 501(c)(3) and government organizations **5**

3 Enter total number of other organizations **6**

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number	13-1635294
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Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X

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

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation					
BRIAN A. GALLAGHER *	(i)	415,970.	80,000.	486,798.	18,348.	36,024.	1,037,140.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JOSEPH V HAGGERTY	(i)	269,003.	47,644.	30,156.	10,021.	37,076.	393,900.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
USHA CHAUDHARY	(i)	209,049.	33,346.	36,820.	0.	23,396.	302,611.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
PATRICIA TURNER	(i)	146,314.	0.	19,124.	0.	16,465.	181,903.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DEBORAH FOSTER *	(i)	225,286.	30,405.	143,094.	11,241.	39,970.	449,996.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
CYNTHIA ROUND	(i)	229,392.	32,103.	27,544.	3,139.	17,996.	310,174.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
PHILLIP MANVILLE	(i)	162,794.	31,288.	32,904.	74.	18,653.	245,713.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
ALEXANDER SANCHEZ	(i)	172,323.	19,030.	29,865.	0.	24,888.	246,106.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MATHEW DECAMARA	(i)	156,614.	0.	45,530.	0.	21,562.	223,706.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A: A HOUSING ALLOWANCE IS PROVIDED TO BRIAN A. GALLAGHER,

PRESIDENT/CEO, AND IS INCLUDED IN HIS TAXABLE COMPENSATION.

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.**

▶ **Attach to Form 990.**

Name of the organization **UNITED WAY WORLDWIDE
FORMERLY UNITED WAY OF AMERICA** Employer identification number **13-1635294**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other) ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>SOFTWARE SUPP</u>)	X	1	26,851	DONOR COST
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2008

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number	13-1635294
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

INVESTOR RELATIONS

CAMPAIGN AND PUBLIC RELATIONS

PUBLIC POLICY

ENTERPRISE SERVICES

EXPENSES \$ 21261803. INCLUDING GRANTS OF \$ 10896079. REVENUE \$ 427857.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: NOMINEES TO THE BOARD OF TRUSTEES

MUST BE APPROVED BY THE MEMBERSHIP, BY A MAJORITY VOTE.

FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS MUST ALSO APPROVE ANY

AMENDMENTS TO THE BYLAWS OF THE ORGANIZATION OR ANY EXTRAORDINARY BUSINESS

EVENT SUCH AS A MERGER OR SALE OF SUBSTANTIALLY ALL OF THE CORPORATE

ASSETS.

FORM 990, PART VI, SECTION A, LINE 10: FORM 990 WAS APPROVED BY THE AUDIT

COMMITTEE AND SENT TO ALL BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS

INCLUDED IN THE ORGANIZATION'S CODE OF ETHICS AND ENFORCED BY THE ETHICS

OFFICER.

FORM 990, PART VI, SECTION B, LINE 15: SEE ATTACHED SUPPLEMENTAL

INFORMATION - UNITED WAY OF AMERICA FISCAL YEAR 2008 COMPENSATION COMMITTEE

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

Schedule O (Form 990) 2008

832211
12-18-08

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number	13-1635294
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REPORT

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, CT, DC, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK

OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS: UWA WEBSITE

CONFLICT OF INTEREST POLICY: UPON REQUEST

FINANCIAL STATEMENTS: UWA WEBSITE

FORM, 990, PART XI, LINE 2

OVERSIGHT OF AUDIT

THERE WAS NO CHANGE IN THE PROCESS OF OVERSIGHT OF THE AUDIT DURING THE YEAR.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: PEGGY CONLON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BUSINESS RELATIONSHIP

(D) DESCRIPTION OF TRANSACTION: A NONCOMPENSATED MEMBER OF THE BOARD OF

TRUSTEES ALSO SERVES AS PRESIDENT/CEO OF THE AD COUNCIL. THE AD COUNCIL

HAS PROVIDED CONTRACT SERVICES AND HAS PERFORMED PRO BONO WORK FOR UNITED

WAY OF AMERICA DURING THE YEAR

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number 13-1635294
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AMENDED RETURN

RETURN BEING UPDATED FOR CHANGES TO FINAL FINANCIAL STATEMENTS

THE PARTS OF THE 990 BEING AMENDED DUE TO CHANGES IN THE FINAL

FINANCIAL STATEMENTS ARE PARTS VIII, IX, X, SCH D VI, SCH D XI, SCH D

XII, SCH D, XIII, AND SCH D XIV.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

OMB No. 1545-0047

2008
Open to Public Inspection

Name of the organization	UNITED WAY WORLDWIDE FORMERLY UNITED WAY OF AMERICA	Employer identification number	13-1635294
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Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
UNITED EWAY - 54-1463201 701 NORTH FAIRFAX STREET ALEXANDRIA, VA 22314	PLEDGE PROCESSING AND FUND DISTRIBUTION	VIRGINIA	501(C)(3)	509(A)(3)	

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	X	
b Gift, grant, or capital contribution to other organization(s)	X	
c Gift, grant, or capital contribution from other organization(s)		X
d Loans or loan guarantees to or for other organization(s)	X	
e Loans or loan guarantees by other organization(s)		X
f Sale of assets to other organization(s)	X	
g Purchase of assets from other organization(s)		X
h Exchange of assets		X
i Lease of facilities, equipment, or other assets to other organization(s)		X
j Lease of facilities, equipment, or other assets from other organization(s)		X
k Performance of services or membership or fundraising solicitations for other organization(s)		X
l Performance of services or membership or fundraising solicitations by other organization(s)		X
m Sharing of facilities, equipment, mailing lists, or other assets		X
n Sharing of paid employees		X
o Reimbursement paid to other organization for expenses		X
p Reimbursement paid by other organization for expenses		X
q Other transfer of cash or property to other organization(s)		X
r Other transfer of cash or property from other organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) SALES/SERVICE AMERICA, INC (UNITED WAY STORE)	A	413,900.
(2)		
(3)		
(4)		
(5)		
(6)		

