

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)

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 2002 calendar year, or tax year beginning 2002, and ending

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: UNITED WAY OF CENTRAL ILLINOIS, INC. Number and street: 730 EAST VINE. City or town: SPRINGFIELD, IL 62703

D Employer identification number: 37-0716060. E Telephone number: (217) 789-7000. F Accounting method: Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? No. H(d) Is this a separate return filed by an organization covered by a group ruling? No. I Enter 4-digit GEN. M Check if the organization is not required to attach Sch B (Form 990 990-EZ, or 990-PF)

G Web site WWW.UWCIL.ORG

J Organization type (check only one) X 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 4,291,894

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

Table with 21 rows and 4 columns. Rows 1-12: Revenue. Rows 13-17: Expenses. Rows 18-21: Net Assets. Includes a 'RECEIVED' stamp from OGDEN, UT dated MAY 20 2003.

SCANNED JUN 16 2003

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B) (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 21 of the instructions)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include: 22 Grants and allocations, 23 Specific assistance to individuals, 24 Benefits paid to or for members, 25 Compensation of officers, directors, etc, 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation depletion, etc, 43 Other expenses not covered above, 44 Total functional expenses.

Joint Costs Check [] if you are following SOP 98-2
Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? [] Yes [X] No
If "Yes," enter (i) the aggregate amount of these joint costs \$, (ii) the amount allocated to Program services \$, (iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See page 24 of the instructions)

Table with 2 columns: Description, Program Service Expenses. Row a: SEE ATTACHED SCHEDULE (Grants and allocations \$ 1,212,050) 2,400,793. Row b: (Grants and allocations \$) . Row c: (Grants and allocations \$) . Row d: (Grants and allocations \$) . Row e: Other program services (attach schedule) (Grants and allocations \$) . Row f: Total of Program Service Expenses (should equal line 44, column (B), Program services) 2,400,793

Part IV Balance Sheets (See page 24 of the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year		
Assets	45	Cash - non-interest-bearing	350	45	350	
	46	Savings and temporary cash investments	1,647,852	46	1,769,509	
	47a	Accounts receivable	47a	42,538		
	b	Less allowance for doubtful accounts	47b		47c	42,538
	48a	Pledges receivable	48a	3,308,618		
	b	Less allowance for doubtful accounts	48b	339,045	48c	2,969,573
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		3,661	53	6,031
	54	Investments - securities (attach schedule)			54	
	55a	Investments - land, buildings, and equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55c	
56	Investments - other (attach schedule)		1,387,022	56	1,269,792	
57a	Land, buildings, and equipment basis	57a	718,504			
b	Less accumulated depreciation (attach schedule)	57b	633,159	57c	85,345	
58	Other assets (describe ► STMT 6)		476,887	58	376,052	
59	Total assets (add lines 45 through 58) (must equal line 74)		5,271,723	59	6,519,190	
Liabilities	60	Accounts payable and accrued expenses		24,822	60	30,593
	61	Grants payable			61	
	62	Deferred revenue			62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)			64b	
	65	Other liabilities (describe ► STMT 7)		895,470	65	919,460
66	Total liabilities (add lines 60 through 65)		920,292	66	950,053	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		2,495,314	67	3,983,017
	68	Temporarily restricted		1,397,675	68	1,219,991
	69	Permanently restricted		458,442	69	366,129
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		4,351,431	73	5,569,137
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		5,271,723	74	6,519,190

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information (See page 27 of the instructions)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b If "Yes," enter the name of the organization UNITED WAY OF CENTRAL IL FOUNDATION			
and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
81a	Enter direct or indirect political expenditures See line 81 instructions	81a	
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		85b	N/A
c Dues, assessments, and similar amounts from members		85c	N/A
d Section 162(e) lobbying and political expenditures		85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)		85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities		86b	N/A
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 NONE , section 4912 NONE , section 4955 NONE		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			N/A
d Enter Amount of tax on line 89c, above, reimbursed by the organization			N/A
90a	List the states with which a copy of this return is filed ILLINOIS		
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)		90b	8
91	The books are in care of ROBERT BORCHERDING Telephone no 217-789-7000 Located at 730 EAST VINE, SPRINGFIELD, ILLINOIS ZIP + 4 62703		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92		N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	78,901	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	68,034	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b ADMINISTRATIVE FEE					107,909
c MISCELLANEOUS					19,606
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				146,935	127,515
105 Total (add line 104, columns (B), (D), and (E))					274,450

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
103	THE OTHER REVENUE SOURCES CONTRIBUTED TO THE ATTRACTION AND COORDINATION OF VOLUNTEERS TO SOLICIT FUNDS AND TO THE ADMINISTRATION PROCESS OF DISTRIBUTING FUNDS TO THE VARIOUS NON-PROFIT ENTITIES SERVED

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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.

Please Sign

[Signature]

5/14/03

Date

President

Date *[Signature]* Check if Preparer's SSN or PTIN (See Gen. Inst. W)

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? .SEE. 990, PART V.	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments	STMT 12	

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box)
- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
 - 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
 - 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
 - 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
 - 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
 - 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 11 b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 12 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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A)
 - 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	2,528,144	2,451,037	2,296,746	2,288,535	9,564,462
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	120,597	130,438	95,701	129,817	476,553
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 13 147,551	148,074	157,454	339,897	792,976
23 Total of lines 15 through 22	2,796,292	2,729,549	2,549,901	2,758,249	10,833,991
24 Line 23 minus line 17	2,796,292	2,729,549	2,549,901	2,758,249	10,833,991
25 Enter 1% of line 23	27,963	27,295	25,499	27,582	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 216,680
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	b				26b 634,488
c Total support for section 509(a)(1) test. Enter line 24, column (e)	c				26c 10833991
d Add Amounts from column (e) for lines 18, 19, 22, 26b	d				26d 1,904,017
e Public support (line 26c minus line 26d total)	e				26e 8,929,974
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	f				26f 82.4255%
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2001) _____ (2000) _____ (1999) <u>NOT APPLICABLE</u> (1998) _____				
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2001) _____ (2000) _____ (1999) _____ (1998) _____	b				
c Add Amounts from column (e) for lines 15, 16, 17, 20, 21	c				27c
d Add Line 27a total and line 27b total	d				27d
e Public support (line 27c total minus line 27d total)	e				27e
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)	f				27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	g				27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	h				27h %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

Table with 3 columns: Question Number, Question Text, and Yes/No columns. Rows include questions 29 through 35 regarding racial nondiscrimination policies, scholarships, and financial aid.

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed ONLY by an eligible organization that filed Form 5768) NOT APPLICABLE

Check a if the organization belongs to an affiliated group
 Check b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 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	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

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 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

UNITED WAY OF CENTRAL ILLINOIS, INC
FEIN· 37-0716060
TAX YEAR ENDED 12/31/2002

ATTACHMENT TO FORM 990, PART IV, LINE 57a & 57b

	2002		2001
BUILDING	\$ 188,389	\$	188,389
BUILDING IMPROVEMENTS	302,685		302,685
FURNITURE & EQUIPMENT	227,430		227,430
	<u>718,504</u>		<u>718,504</u>
LESS ACCUMULATED DEPRECIATION	(633,159)		(620,695)
	<u>\$ 85,345</u>	\$	<u>97,809</u>

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED LOSS ON INVESTMENTS	115,449.
UNREALIZED LOSS ON PERPETUAL TRUSTS	92,313.

TOTAL	207,762.

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GRANTS PAID

SEE ATTACHED FINANCIAL STATEMENT
NOTE 14 OF FINANCIAL STATEMENTS

501 (C) (3)

OPERATIONS ASSISTANCE

1,212,050

TOTAL CONTRIBUTIONS PAID

1,212,050

UNITED WAY OF CENTRAL ILLINOIS, INC

NOTES TO FINANCIAL STATEMENTS

Note 14 Allocations to Human Services Agencies

The following allocations were made for the years ended December 31, 2002 and 2001 as follows

	2002	2001
American Heart Association	\$ -	\$ 32,668
American Red Cross	50,033	60,076
Big Brother - Big Sister of Sangamon County	37,331	37,314
Boys' & Girls' Clubs of Springfield	134,951	128,383
Boy Scouts of America - Abraham Lincoln Council	58,582	58,800
Catholic Charities of Springfield	153,994	150,335
Central Illinois Food Bank	40,788	39,499
Family Service Center of Sangamon County	145,627	193,917
Girl Scouts, Land of Lincoln Council, Inc	62,116	65,369
Helping Hands of Springfield	18,216	18,208
Land of Lincoln Goodwill Industries, Inc	33,592	35,344
Land of Lincoln Legal Assistance	7,112	7,898
Lutheran Child & Family Services	8,426	4,373
Mental Health Centers of Central Illinois	-	16,256
Mini O'Beirne Crisis Nursery	8,846	-
The Parent Place	11,941	13,020
Prairie Center Against Sexual Assault	29,390	28,800
Rutledge Youth Foundation, Inc	35,016	26,714
Senior Citizens of Sangamon Center, Inc.	34,835	36,096
Sojourn Shelter & Services	42,079	36,767
Springfield Association for Retarded Citizens	51,500	61,496
Springfield Urban League	45,597	51,665
United Cerebral Palsy	41,758	44,147
YMCA	80,737	80,708
Youth Service Bureau	79,583	79,546
	<u>\$ 1,212,050</u>	<u>\$ 1,307,399</u>

Note 15. Bequest Receivable

In April 2002, the Organization received a bequest from the estate of a donor. The amount anticipated to be received is approximately \$1,500,000. This balance is recorded as a bequest receivable as of December 31, 2002. As of March 31, 2003, approximately \$1,150,000 has been received by the Organization and the remaining balance is expected to be received during 2003 upon final acceptance of the Estate Tax Return from the Internal Revenue Service.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
SECA CAMPAIGN EXPENSES	27,223.		418.	26,805.
REAL ESTATE TAXES	9,673.		9,673.	
SPECIFIC EVENTS	13,598.		3,808.	9,790.
ORGANIZATION DUES	1,394.		1,024.	370.
MISCELLANEOUS	5,680.	73.	5,573.	34.
MARKETING AND ADVERTISING	27,333.		11,964.	15,369.
STATE AND NATIONAL DUES	23,638.		23,638.	
LAND LEASE	2,000.		2,000.	
DONOR DESIGNATIONS	959,823.	959,823.		
TOTALS	1,070,362.	959,896.	58,098.	52,368.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO PROMOTE COMMUNITY PLANNING BY DEVELOPING AND ALLOCATING HUMAN AND FINANCIAL RESOURCES TO MEET PRIORITY HEALTH AND HUMAN SERVICE NEEDS.

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION	ENDING BOOK VALUE
-----	-----
COMMON STOCKS	6,124.
MUTUAL FUNDS	1,263,668.
TOTALS	----- 1,269,792. -----

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION -----	ENDING BOOK VALUE -----
INTEREST RECEIVABLE	9,922.
BENEFICIAL INTEREST IN PERPETUAL TRUSTS	366,130.

TOTALS	<u>376,052.</u>

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	ENDING BOOK VALUE
-----	-----
DESIGNATIONS PAYABLE	643,171.
ALLOCATIONS PAYABLE	276,289.

TOTALS	919,460.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

DESCRIPTION	AMOUNT
-----	-----
DONOR DESIGNATIONS	959,823.
TOTAL	----- 959,823. =====

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

DESCRIPTION -----	AMOUNT -----
DONOR DESIGNATIONS	959,823.

TOTAL	959,823.
	=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JOHN KELKER 730 E. VINE SPRINGFIELD, IL	PRESIDENT FULL-TIME	74,808.	7,477.	NONE
PAT HUGHES 730 E. VINE SPRINGFIELD, IL	DIRECTOR FULL-TIME	48,122.	4,813.	NONE
ROBERT BORCHERDING 730 E. VINE SPRINGFIELD, IL	DIRECTOR-FINANCE FULL-TIME	52,392.	5,238.	NONE
JACK DYER 730 E. VINE SPRINGFIELD, IL	LIAISON FULL-TIME	50,002.	5,001.	NONE
SEE ATTACHED LISTING	PART-TIME	NONE	NONE	NONE
GRAND TOTALS		225,324.	22,529.	NONE



**BOARD OF DIRECTORS
2002 ROSTER**

Ronald E Sides, Chair

Elaine Birtch	2606 West Lake Dr 62707	Res. (217) 529-5885 Fax (217) 529-5865 E-mail birtch32@aol.com
Carolyn Blackwell	Springfield Public School District 1900 West Monroe St 62704	Bus (217) 525-3257 Fax (217) 525-4409 E-mail carblk@springfield.k12.il.us
Jeffery Burnett Sandy	Carpenters Local #16 211 West Lawrence Ave 62704	Bus (217) 528-7571 Fax (217) 528-9364 E-mail jeffburnett@worldnet.att.net
Jack Butler	Kirlin, Egan & Butler Funeral Home 900 South 6th St 62703	Bus (217) 544-4646 Fax (217) 528-8537 E-mail cbutler@famvid.com
Marc Carter	Kerber, Eck & Braeckel 1000 Myers Bldg 62701	Bus (217) 789-0960 Fax (217) 789-2822 E-mail marcc@spfld.kebcpa.com
Glen Cope, Ph D Vicki Locke	University of Illinois P O Box 19243 62794-9243	Bus (217) 206-6523 Fax (217) 206-7807 E-mail cope.glen@uis.edu
Edgar Curtis Cindy Appenzeller	Memorial Medical Center 701 N 1st St 62781	Bus (217) 788-3181 Fax (217) 788-5591 E-mail curtis.ed@mhsil.com
Phillip V Davis, Ph D Sally Heckler	Southern Illinois University P O Box 19604 62794	Bus (217) 545-5770 Fax (217) 545-2024 E-mail pdavis@siu.edu
Dave DeFrates	Springfield Fire Department 851 South Spring St 62704	Res (217) 528-5879 Fax (217) 528-5744 E-mail ddd2418@aol.com
Jane Denes	Posegate & Denes, PC P O Box 338 62705	Bus (217) 522-6152 Fax (217) 522-6184 E-mail jane@posegate-denes.com

Hewitt Douglass	AFSCME Local 2600 221 South 3rd, Ste 301 62701	Bus (217) 753-2600 Fax (217) 753-2860 E-mail local2600@aol.com
Daniel Dungan Tracy Spencer	Springfield Electric Supply Company PO Box 4106 62708	Bus (217) 788-2100 Fax (217) 788-2133 E-mail dungan@sprelec.com
John Farrell	Illinois Ventures for Community Action P O Box 9285 62791-9285	Bus (217) 522-4553 Fax (217) 522-9324 E-mail jfarrell@ilventures.org
Tom Gihl	Illinois National Bank 322 E Capitol 62701	Bus (217) 747-5500 Fax (217) 747-5555 E-mail tgihl@illinoisnationalbank.com
Ron Groepper	St John's Hospital 800 E Carpenter St 62769	Bus (217) 544-6464 X44577 Fax (217) 535-3989 E-mail rgroeppe@st-johns.org
Dr Jerold Gruebel Mary Jane Bates	WSEC-TV 14/8 P O Box 6248 62708	Bus (217) 206-6647 Fax (217) 206-7267 E-mail jerry_gruebel@wmec.pbs.org
Shelley Hoffman	10471 South Main St 62629	Res (217) 483-2743 Fax (217) 483-2743 E-mail kshoffman@springnet1.com
Dr James Howard	2304 Peppermill Pointe (07)	Res (217) 585-0586 E-mail jim.howard@llcc.cc.il.us
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Sylvia Miller Becky Allen	American General Financial Group #1 Franklin Square 62713	Bus (217) 747-3241 Fax (217) 747-4241 E-mail sylvia_a_miller@agfg.com
Harry Mitchell Nicki	Horace Mann Companies One Horace Mann Plaza G230 62715	Bus (217) 788-5302 Fax (800) 217-7351 E-mail mitcheh1@mail.horacemann.com
Charles Moe Barb or Erin	Hospital Sisters Health System P O Box 19456 62794-9456	Bus (217) 523-4747 Fax (217) 523-0542 E-mail cmoe@hshs.org
Allen Pieper Hallie Mayner	General Services Employees Union #73 528 South 5th Street, Suite 206 62701	Bus (217) 522-1182 Fax (217) 522-9183 E-mail local73seu@springnet1.com

Page 3, Board of Directors' Roster for 2002

Dr Richard Ringeisen Emily Schirding	University of Illinois One University Plaza 62707	Bus (217) 206-6634 Fax (217) 206-6511 E-mail ringeisen.richard@uis.edu
Amy Sherwood	Sikich Group 1000 Churchill Road 62702	Bus (217) 793-3363 Direct 862-1728 Fax (217) 793-3016 E-mail amys@sikich.com
Ronald E Sides Linda Weyant	Bank One, Illinois 1 E Old State Capitol Plaza 62701	Bus (217) 525-9754 Fax (217) 522-7482 E-mail ronald_e_sides@bankone.com
Tami Silverman	Sojourn Shelter & Services, Inc 1800 Westchester Blvd 62704	Bus (217) 726-5100 Fax (217) 726-8664
Bill Simpson	2237 Greenside Drive 62704	Res (217) 793-0822 Fax (217) 793-6605 E-mail nancybill1@insightbb.com
Kent Starkey Cathy Nunn	U S Bank 205 South 5th St 62701	Bus (217) 753-7542 Fax (217) 753-7558 E-mail Kent G Starkey@Firststar.com
Joe Steil	Union Planters Bank 1825 South 6th St 62703	Bus (217) 525-6430 Fax (217) 492-3188 E-mail Joseph Steil@upbna.com
Harvey M Stephens Laura Smocyck	Brown, Hay & Stephens 205 South 5th St , Ste 700 62701	Bus (217) 544-8491 x239 Fax (217) 544-9609 E-mail hmstephens@bhslaw.com
John Stinson Denise Harney	National City Bank 1 Old Capitol Plaza North 62701	Bus (217) 753-7002 Fax (217) 753-7194 E-mail john.stinson@nationalcity.com
Steven Troup Sue Crowson	Schnucks-Montvale Commons 2801 Chatham Road 62704	Bus (217) 698-2980 Fax (217) 698-3364 E-mail. stroup@schnucks.com
Anne Vandenberg	1800 Illini Road 62704	Res (217) 787-5409 Fax (217) 787-2503 E-mail bvandenberg@springnet1.com
Gene Wilkinson	Hanson Professional Services, Inc 1525 South 6th St 62703	Bus (217) 788-2450 Fax (217) 529-0647 E-mail ewilkinson@hansonengineers.com

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

ORGANIZATIONS APPLY TO THE UNITED WAY TO RECEIVE FUNDS. A COMMITTEE OF VOLUNTEERS RESEARCHES EACH OF THE APPLICANT ORGANIZATIONS ON BEHALF OF THE UNITED WAY AND MAKES RECOMMENDATIONS TO THE BOARD.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2001	2000	1999	1998	TOTAL
OTHER REVENUE	147,551.	148,074.	157,454.	339,897.	792,976.
TOTALS	147,551.	148,074.	157,454.	339,897.	792,976.

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