

NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx>



Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

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 01-01-2008 and ending 12-31-2008

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: United Way of Central Illinois Inc, Doing Business As, Address: 1999 West Wabash Avenue Suite 107, Springfield, IL 62704

D Employer identification number: 37-0716060, E Telephone number: (217) 726-7000, G Gross receipts \$ 6,635,649

F Name and address of Principal Officer: John Kelker, 1999 West Wabash Avenue Suite 107, Springfield, IL 62704

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No (If "No," attach a list See instructions)

H(c) Group Exemption Number

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

J Web site: www.uwcil.org

K Type of organization: Corporation trust association other

L Year of Formation 1922 M State of legal domicile IL

Part I Summary

Table with 4 columns: Category (Activities & Governance, Revenue, Expenses, Net Assets or Fund Balances), Description, Prior Year, Current Year. Rows include mission statement, revenue breakdown, expenses, and asset balances.

Part II Signature Block

Signature block containing declaration of preparer, signature of officer (John Kelker, PRESIDENT), and date (2009-08-31).

Paid Preparer's Use Only section with fields for preparer's signature (George Weber), firm's name (RSM McGladrey Inc), EIN, and phone number.

May the IRS discuss this return with the preparer shown above? Yes No

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

1 Briefly describe the organization's mission
NURTURING CHILDREN & YOUTH- THESE ARE PROJECTS AND INITIATIVES ENSURING HEALTHY DEVELOPMENT, POSITIVE VALUES AND SKILLS FOR CHILDREN & YOUTH INCLUDES PROGRAMS WHICH ARE FOCUSED ON EDUCATION, MENTORING AND COUNSELING, SAFE PLACES TO LEARN AND GROW, CHARACTER DEVELOPMENT, AND ENRICHMENT ACTIVITIES

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 (4) organizations and 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 \$ 721,048 including grants of \$) (Revenue \$)
NURTURING CHILDREN & YOUTH- THESE ARE PROJECTS AND INITIATIVES ENSURING HEALTHY DEVELOPMENT, POSITIVE VALUES AND SKILLS FOR CHILDREN & YOUTH INCLUDES PROGRAMS WHICH ARE FOCUSED ON EDUCATION, MENTORING AND COUNSELING, SAFE PLACES TO LEARN AND GROW, CHARACTER DEVELOPMENT, AND ENRICHMENT ACTIVITIES

4b (Code) (Expenses \$ 351,795 including grants of \$) (Revenue \$)
RESPONDING TO BASIC NEEDS- THESE ARE PROJECTS AND INIATIVES PROVIDING A SAFETY NET FOR INDIVIDUALS AND FAMILIES INCLUDES PROGRAMS WHICH ARE FOCUSED ON HEALTH CARE CLINICS AND PRESCRIPTION DRUG PROGRAMS, CRISIS ASSISTANCE AND DISASTER RELIEF, FOOD PANTRIES, LUNCH, DINNER, AND AFTER-SCHOOL MEALS, AND OVERNIGHT SHELTER AND EMERGENCY SERVICES

4c (Code) (Expenses \$ 335,003 including grants of \$) (Revenue \$)
FOSTERING INDEPENDENCE- THESE ARE PROJECTS AND INIATIVES HELPING PEOPLE TO INCREASE THEIR SELF-SUFFICIENCY AND MAINTAIN THEIR INDEPENDENCE INCLUDES PROGRAMS WHICH ARE FOCUSED ON SHELTER AND SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE, TRANSPORTATION, COUNSELING, HOME DELIVERED MEALS FOR SENIORS, VOCATIONAL AND RESIDENTIAL SERVICES, THERAPIES AND ASSISTANCE FOR THE DISABLED, AND TRANSITIONAL LIVING, LIFE SKILLS, AND SUPPORT GROUPS

(Code) (Expenses \$ 1,272,546 including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 2,680,392 *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> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
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>		No
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
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>		
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> <input checked="" type="checkbox"/>		No
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>		No
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> <input checked="" type="checkbox"/>		No
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> <input checked="" type="checkbox"/>		No
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
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> <input checked="" type="checkbox"/>	Yes	
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> <input checked="" type="checkbox"/>	Yes	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the U S ?		No
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>		No
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>		No
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>		No
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>		No
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>		No
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No
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> <input checked="" type="checkbox"/>	Yes	
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> <input checked="" type="checkbox"/>		No
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		No
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>		No
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>		No
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>		No
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>		No
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>		No

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>		No
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>		No
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>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
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>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
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>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
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>		No
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>		No
36	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>		No
37	Did the organization conduct more than 5 percent 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>		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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 2-7 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?		No
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?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
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	Yes	
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		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?		No
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?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O		No
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?		No
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 <u>IL</u>
18	Section 6104 requires an organization to make its Form 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. <input type="checkbox"/> own website <input checked="" type="checkbox"/> another's website <input checked="" type="checkbox"/> 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. See Additional Data Table
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ROBERT BORCHERDING 1999 West Wabash STE 107 SPRINGFIELD, IL 62074 (217) 726-7000

Part VIII Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a 272,411					
	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 3,148,231 1f					
	g	Noncash contributions included in lines 1a-1f \$ 21,683					
	h	Total (Add lines 1a-1f)	3,420,642				
Program Service Revenue	2a	DESIGNATION PROCESSING Business Code 624,200	52,998	52,998			
	b	MEETINGS & KICKOFF REV 624,200	19,674	19,674			
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f \$ 72,672					
Other Revenue	3	Investment income (including dividends, interest other similar amounts)	194,275			194,275	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross Rents	(i) Real				
			(ii) Personal				
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	2,889,018			
			(ii) Other				
				2,921,344			
				-32,326			
b	Less cost or other basis and sales expenses						
c	Gain or (loss)						
d	Net gain or (loss)	-32,326	-32,326				
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a						
b	Less direct expenses b						
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a						
b	Less direct expenses b						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances a						
b	Less cost of goods sold b						
c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
11a	ADMINISTRATIVE FEE 624,200	59,042	59,042				
b							
c							
d	All other revenue _____						
e	Total. Add lines 11a-11d \$ 59,042						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	3,714,305	99,388	0	194,275		

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	2,461,178	2,461,178		
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	152,991	92,520	60,471	
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	190,150	33,911		131,900
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	31,236	11,509	7,720	12,007
9	Other employee benefits	35,370	13,032	8,742	13,596
10	Payroll taxes	28,499	10,501	7,043	10,955
11	Fees for services (non-employees)				
a	Management				
b	Legal	742	40	629	73
c	Accounting	12,448	671	10,545	1,232
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	17,001	916	14,401	1,684
12	Advertising and promotion	24,887	5,225	17	19,645
13	Office expenses	27,088	3,561	13,089	10,438
14	Information technology				
15	Royalties				
16	Occupancy	72,422	32,664	29,585	10,173
17	Travel	7,686	1,236	3,649	2,801
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	22,453	769	2,200	19,484
20	Interest				
21	Payments to affiliates	32,558	11,981	8,075	12,502
22	Depreciation, depletion, and amortization	10,442		10,442	
23	Insurance	9,177		9,177	
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	MISCELLANEOUS	30,491		13,305	17,186
b	SECA CAMPAIGN EXPENSES	24,470			24,470
c	MAINTENANCE	1,812	623	485	704
d	DUES & SUBSCRIPTIONS	1,169	55	784	330
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,194,270	2,680,392	224,698	289,180
26	Joint Costs. Check <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	350	1	
	2 Savings and temporary cash investments	2,433,451	2	2,858,535
	3 Pledges and grants receivable, net	1,474,296	3	1,617,555
	4 Accounts receivable, net	72,511	4	60,773
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	7,362	9	3,015
	10a Land, buildings, and equipment cost basis			
		10a 225,222		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 72,593	132,207	10c 152,629
	11 Investments—publicly traded securities	4,360,618	11	3,300,708
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12	
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	454,397	15	329,750	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,935,192	16	8,322,965	
Liabilities	17 Accounts payable and accrued expenses	44,320	17	65,893
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	1,595,602	25	1,500,697
	26 Total liabilities. Add lines 17 through 25	1,639,922	26	1,566,590
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	4,787,286	27	4,134,486
	28 Temporarily restricted net assets	1,411,018	28	1,690,495
	29 Permanently restricted net assets	1,096,966	29	931,394
	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	7,295,270	33	6,756,375	
34 Total liabilities and net assets/fund balances	8,935,192	34	8,322,965	

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?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	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?	Yes	
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?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

**SCHEDULE A
(Form 990 or
990EZ)**

Public Charity Status and Public Support

OMB No 1545-0047

2008

**Open to Public
Inspection**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the
Treasury
Internal Revenue
Service

Name of the organization
United Way of Central Illinois Inc

Employer identification number

37-0716060

Part I Reason for Public Charity Status (to be completed by all organizations) (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 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?

- (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 the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
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 IRC 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.)

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")	2,816,716	3,113,565	2,763,347	3,395,857	3,493,314	15,582,799
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 line 1-3	2,816,716	3,113,565	2,763,347	3,395,857	3,493,314	15,582,799
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						772,173
6 Public Support subtract line 5 from line 4						14,810,626

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	2,816,716	495,238	2,763,347	3,395,857	3,493,314	15,582,799
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	153,486	495,238	229,506	257,510	161,949	1,297,689
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	153,994	143,991	161,906	95,909	59,042	614,842
11 Total Support (Add lines 7 through 10)						17,495,330
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	84 650 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	84 730 %

- 16a 33 1/3% 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
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10% Facts and Circumstances Test - 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
- 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
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in IRC 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 Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

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 30 June, 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 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

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 for 2007 Schedule A, Part IV-A, line 27g	16	

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% 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% 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

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

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 6, 7, 8, 9, 10, 11, or 12.

Name of the organization United Way of Central Illinois Inc

Employer identification number 37-0716060

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate contributions, aggregate grants, and aggregate value.

- 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...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes...

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)
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

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 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?
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 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet...

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

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

b If "Yes," explain why in Part XIV and complete the following table

Table with 2 columns: Description (1c-1f) and Amount

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

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows 1a-1g.

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment 74.300%, b Permanent endowment 25.700%, c Term endowment

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

Table with 3 columns: Description (3a(i), 3a(ii), 3b) and Yes/No columns

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.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows 1a-1e and Total.

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	3,714,305
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,194,270
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	520,035
4	Net unrealized gains (losses) on investments	4	-1,058,930
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-1,058,930
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-538,895

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	1,804,195
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	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,804,195
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	1,910,110
c	Add lines 4a and 4b	4c	1,910,110
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	3,714,305

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

1	Total expenses and losses per audited financial statements	1	2,343,090
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	2,343,090
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	851,180
c	Add lines 4a and 4b	4c	851,180
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	3,194,270

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 XIV, 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

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	THE BOARD DESIGNATED QUASI-ENDOWMENT FUNDS ARE USED TO SUPPORT THE OVERHEAD EXPENSES OF THE ORGANIZATION AND THE PERMANENTLY RESTRICTED ENDOWMENT FUNDS ARE USED TO SUPPORT HEALTH AND HUMAN SERVICES IN THE COMMUNITY

Schedule I (Form 990)

OMB No 1545-0047

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

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

United Way of Central Illinois Inc

Employer identification number

37-0716060

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000.

Table with 8 columns: (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, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

2 Enter total number of section 501(c)(3) and government organizations 35
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.
See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 ORGANIZATIONS APPLY TO THE UNITED WAY TO RECEIVE FUNDS A COMMITTEE OF VOLUNTEERS RESEARCHES EACH OF THE APPLICANTS AND MAKES RECOMMENDATIONS TO THE UNITED WAY BOARD OF DIRECTORS

Software ID:
Software Version:
EIN: 37-0716060
Name: United Way of Central Illinois Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
AMERICAN RED CROSS 1045 OUTER PARK DRIVE SPRINGFIELD, IL 62705	37-0716060	501(C)3	45,487				EMERGENCY SERVICES- SERVES AS CENTRAL ILLINOIS' MOST CRUCIAL, NON-GOVERNMENTAL PROVIDER OF EMERGENCY SERVICES INCLUDING DISASTER RELIEF AND SERVICE TO ARMED FORCES
BIG BROTHERBIG SISTER OF SANGAMON COUNTY 444 SOUTH GRAND AVE WEST SPRINGFIELD, IL 62704	37-0997310	501(C)3	56,410				Community Mentoring - The key to the BBBS mentoring program is that it is always one-to-one, which helps establish a positive friendship between the volunteer and child, and every relationship is supported professionally by a Case Manager
BOYS & GIRLS CLUB OF CENTRAL ILLINOIS 300 SOUTH FIFTEENTH STREET SPRINGFIELD, IL 62705	37-0752849	501(C)3	145,201				Youth Development Core Program - Designed to prevent juvenile delinquency and enable young people, particularly those from disadvantaged circumstances, to realize their full potential as productive, responsible and caring citizens Provides critical supports to youth and families by providing daily, comprehensive, after-school and summer programs
BOY SCOUTS OF AMERICA-AL COUNCIL 5231 SOUTH SIXTH STREET ROAD SPRINGFIELD, IL 62703	22-1576300	501(C)3	49,675				Venturing and Exploring - Young men and women are given a close look to various careers and hobbies & the opportunity to interact with professionals in the field, helping them to better understand the importance of high school classes, and to better prepare for life after high school
CATHOLIC CHARITIES OF SPRINGFIELD 120 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0661499	501(C)3	30,819				Food Pantry and Crisis Assistance - Immediate relief to the hungry while offering advocacy to those experiencing crisis situations by providing financial assistance for rent, utilities, medications, identifications and transportation
CENTRAL ILLINOIS FOOD BANK 2000 EAST MOFFAT SPRINGFIELD, IL 62791	37-1106465	501(C)3	62,003				FOOD DISTRIBUTION PROGRAM- FOOD DISTRIBUTION
FAMILY SVC CENTER OF SANGAMON COUNTY 1308 SOUTH SEVENTH STREET SPRINGFIELD, IL 62703	37-0681513	501(C)3	18,017				Community Counseling - Provides comprehensive mental health screening, counseling, therapy and referral to individuals, couples, and families with low-to-moderate incomes through a unique combination of traditional and non traditional evidence based programs
GIRL SCOUTS OF CENTRAL IL 3020 BAKER DRIVE SPRINGFIELD, IL 62703	37-0681529	501(C)3	65,788				Girl Scout Program - Provides the opportunity for girls ages 5 to 17 to discover their potential, knowledge, skills and values to explore the world around them, connect with, care about and inspire others, and partner with their community, and take action to make their world a better place
HABITAT FOR HUMANITY 1514 EAST JEFFERSON STREET SPRINGFIELD, IL 62702	37-1250364	501(C)3	32,002				Homeownership Program - Habitat for Humanity of Sangamon County (HFHSC) builds simple, decent, affordable housing for families and individuals in need Our unique program stresses the importance of homeownership in building equity and ending the cycle of temporary, substandard housing as well as disproportionate rent to income ratios
HELPING HANDS OF SPRINGFIELD 200 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-1255889	501(C)3	38,867				Shelter and Support Services - A 33 bed emergency shelter for single, homeless adults, that provides all clients with the basic necessities and access to individualized support services designed by the client and case manager to assist the client in obtaining self sufficiency and independence

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(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
KIDS Hope United 3 OLD STATE CAPITAL PLAZA SPRINGFIELD, IL 62701	37-0697157	501(C)3	10,851				Foster Grandparents - Designed to assist 'high risk' children by providing them with the opportunity to form a supportive relationship with an adult aged 60 years and over
LAND OF LINCOLN GOODWILL INDUSTRIES 800 NORTH TENTH STREET SPRINGFIELD, IL 62792	37-0661254	501(C)3	30,915				Rehabilitation & Vocational Services - We provide assistance & career development services to help people prepare for and obtain community employment
LUTHERN CHILD & FAMILY SERVICES 400 SOUTH GRAND AVENUE WEST SPRINGFIELD, IL 62704	36-2167778	501(C)3	7,897				Family Counseling - Effectively creates positive changes in the lives of adults, adolescents and children with significant mental health needs, many of whom have experienced trauma, are in crisis and need mental health and prevention services
LUTHERN CHILD & FAMILY SERVICES 400 SOUTH GRAND AVENUE WEST SPRINGFIELD, IL 62704	36-2167778	501(C)3	6,268				Title XX Intact Family - The Intact family program provides counseling and case management services to families in which the children are victims of abuse and/or neglect
MERCY COMMUNITIES INC 108 EAST COOK STREET SPRINGFIELD, IL 62703	37-1383599	501(C)3	25,001				Permanent Supportive Housing - Affordable housing, case management and a professional support system to help disabled families with dependent children live healthy, interdependent lives, realizing their potential in homes of their own
MINI O'BEIRNE CRISIS NURSERY 1011 NORTH SEVENTH STREET SPRINGFIELD, IL 62702	37-1242640	501(C)3	27,366				Nursery Program - The program provides temporary emergency care of children, birth through age 6, who are at risk of child abuse and neglect
PORA 930 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-1317999	501(C)3	5,223				Developing Destinies - Works with women with history of prostitution and drug/alcohol use to overcome multiple issues to ensure a strong foundation of support in achieving long-term goals in their transition into productive citizenship
PRAIRIE CENTER AGAINST SEXUAL ASSAULT 3 WEST OLD STATE CAPITAL PLAZA SPRINGFIELD, IL 62701	37-1045364	501(C)3	38,651				Prevention Education - School based primary prevention program designed to prevent the sexual assault, sexual abuse and sexual exploitation of children
RUTLEDGE YOUTH FOUNDATION 534 WEST MILLER STREET SPRINGFIELD, IL 62702	37-0706724	501(C)3	53,432				Youth Counseling - Provides counseling and advocacy services to youth on a one to one basis with a bachelor's level youth advocate case manager Case plan goals are client specific and are developed in tandem with each youth to actualize his/her personal goals for safety, stability and growth
SENIOR SERVICES OF CENTRAL ILLINOIS 701 WEST MASON STREET SPRINGFIELD, IL 62702	37-0895193	501(C)3	24,549				Counseling - Primary objective is to provide social adjustment and rehabilitation counseling The program assists clients to maintain quality, independent community living, with safety, comfort and dignity

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
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SOJOURN SHELTER & SERVICES 1800 WESTCHESTER BLVD SPRINGFIELD, IL 62704	51-0139118	501(C)3	45,502				Adult Shelter and Counseling - Emergency shelter and comprehensive counseling for adult and child victims of domestic violence
SPARC 232 BRUNS LANE SPRINGFIELD, IL 62702	37-0717761	501(C)3	6,184				Epilepsy Resource Center - Supports are designed to promote the welfare of individuals with epilepsy and their families
SPRINGFIELD URBAN LEAGUE 100 NORTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0765550	501(C)3	20,001				Male Involvement - Encourages male relatives and other significant male adults to actively participate in activities with children enrolled in Springfield Urban League youth programs
UNITED CEREBRAL PALSY 130 NORTH SIXTEENTH STREET SPRINGFIELD, IL 62702	37-0902106	501(C)3	10,270				Bridges - The Bridges Program prepares youth with disabilities to enter the workforce and further their education
SPRINGFIELD YMCA PO BOX 155 SPRINGFIELD, IL 62705	37-0661263	501(C)3	76,048				Comprehensive Youth Development - Youth program provides youth with the opportunities for positive growth by exposing them to 29 of the 40 Developmental Assets which are the building blocks for a health life. These experiences make it less likely that youth will engage in problem behaviors and more likely that they will engage in positive, socially accepted behaviors.
YOUTH SERVICE BUREAU 2901 NORMANDY ROAD SPRINGFIELD, IL 62703	36-1015851	501(C)3	127,265				Comprehensive Youth Development - Shelter care for abused, neglected, runaway homeless community youth ages 10-21. Services also include follow up counseling and home stabilization services.
AMERICAN RED CROSS 1045 OUTER PARK DRIVE SPRINGFIELD, IL 62705	37-0716060	501(C)3	13,765				Meals on Wheels - Helps seniors, convalescents, people with disabilities and the chronically ill and others who may need meals delivered on a short or long-term basis to remain out of the hospital and nursing home care by providing them with a hot, nutritious meal delivered right to their door.
CATHOLIC CHARITIES OF SPRINGFIELD 120 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0661499	501(C)3	10,000				Med Assist - Promoting human dignity by helping people with consistently and readily access necessary medicines, for free or at a reduced price, in the dosages needed to maintain their health.
CATHOLIC CHARITIES OF SPRINGFIELD 120 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0661499	501(C)3	110,811				St John's Breadline - Serving a well balanced and nutritious meal giving food security to the hungry 365 days a year within a hospitable and positive environment at no charge.
CATHOLIC CHARITIES OF SPRINGFIELD 120 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0661499	501(C)3	45,808				St Clare's Health Clinic - Providing health care for economically disadvantaged adults and children, including Medicaid recipients, All Kids recipients, and low income families.

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FAMILY SVC CENTER OF SANGAMON COUNTY 730 EAST VINE STREET SPRINGFIELD, IL 62703	37-0681513	501(C)3	25,503				Young Parent Support Services - Provides a continuum of services to first time teen parents and their children Services, provided free of charge, are designed to give families the tools to love as healthy productive members of our community as well as prepare children for an academic setting
LINCOLN LAND LEGAL ASSISTANCE FOUNDATION 3180 ADOLFF LANE SPRINGFIELD, IL 62703	37-0958448	501(C)3	7,000				Family Safety and Stability - Order of protection and other legal remedies for family violence victims Representation of individuals in divorce cases where there has been family violence
LINCOLN LAND LEGAL ASSISTANCE FOUNDATION 3180 ADOLFF LANE SPRINGFIELD, IL 62703	37-0958448	501(C)3	8,000				Housing Issues - Housing issues including tenant/landlord disputes, housing conditions, utility services, homeownership issues including foreclosure
MERCY COMMUNITIES INC 108 EAST COOK STREET SPRINGFIELD, IL 62703	37-1383599	501(C)3	40,002				Transitional Living Program - A two year transitional living program whose goal is to assist homeless young women and their children achieve stability in their lives by providing them with a stable home and intensive support services leading to their self-sufficiency in permanent housing, follow up services available
AMERICAN RED CROSS 1045 OUTER PARK DRIVE SPRINGFIELD, IL 62705	37-0716060	501(C)3	11,396				HEALTH & SAFETY SERVICES- DESIGNED TO REACH PEOPLE IN THEIR HOMES, NEIGHBORHOODS AND SCHOOLS WITH INFORMATION ON THE NATURAL HAZARDS THAT THREATEN THEM, EDUCATING THE PUBLIC ON WHAT THEY CAN AND SHOULD DO TO BETTER PROTECT THEMSELVES, THEIR CHILDREN AND THEIR PROPERTY, AND MOTIVATING PEOPLE TO TAKE THOSE STEPS TO PREPARE FOR, RESPOND TO AND COPE WITH LIFE THREATENING EMERGENCIES
seNIOR SERVICES OF CENTRAL ILLINOIS 701 WEST MASON STREET sPRINGFIELD, IL 62702	37-0895193	501(C)3	32,421				Daily Bread - Nutrition program provides meals at 12 congregate and 12 home-delivered sites in Sangamon County Mid day meals are available Monday-Friday
sENIOR SERVICES OF CENTRAL ILLINOIS 701 WEST MASON STREET sPRINGFIELD, IL 62702	37-0895193	501(C)3	6,249				Senior Transport - Transportation to medical/dental appointments, Daily Breads sites, pharmacies, grocery stores, banks, etc to anyone age 60 and over, living independently
soJOURN SHELTER & SERVICES 1800 WESTCHESTER BLVD sPRINGFIELD, IL 62704	51-0139118	501(C)3	17,236				Children's Shelter And Counseling - Emergency shelter and comprehensive counseling for adult and child victims of domestic violence
SOJOURN SHELTER & SERVICES 1800 WESTCHESTER BLVD SPRINGFIELD, IL 62704	51-0139118	501(C)3	32,002				Court Services - Addresses the physical and emotional domestic violence including beatings, sexual assault, verbal and psychological abuse, and property destruction Specific services include court advocacy, safety planning, 911 on-location crisis intervention, pro bono legal services and legal referral
SOJOURN SHELTER & SERVICES 1800 WESTCHESTER BLVD SPRINGFIELD, IL 62704	51-0139118	501(C)3	15,460				Prevention and Education - Increase community sensitivity and awareness about battering The program aims to change attitudes that allow violence to continue, to enable the public to perceive the abolition of family violence as a community task, and to provide citizens with the strategies to prevent abuse

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
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SOJOURN SHELTER & SERVICES 1800 WESTCHESTER BLVD SPRINGFIELD, IL 62704	51-0139118	501(C)3	9,350				RU4 Respect (Teen Violence) - Educates teens and school stakeholders about the rights and responsibilities of dating relationships RU4 Respect also works with teen victims with high levels of truancy The program aims to increase attendance and participation in school through the reduction of teen dating violence
SPARC 232 BRUNS LANE SPRINGFIELD, IL 62702	37-0717761	501(C)3	10,028				Residential - Residential services for 24 hour intermittent Community Integrated Living Arrangement
SPARC 232 BRUNS LANE SPRINGFIELD, IL 62702	37-0717761	501(C)3	6,769				Respite Care - Provides temporary relief of care giving responsibilities to the families of individuals who live at home with their parent/guardian who have a diagnosis of a developmental disability
SPARC 232 BRUNS LANE SPRINGFIELD, IL 62702	37-0717761	501(C)3	20,892				Vocational Services - Provides vocational training and independent living skills for adults with developmental disabilities
SPRINGFIELD URBAN LEAGUE 100 NORTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0765550	501(C)3	24,501				Teen REACH - Promotes youth leadership, increased parent and youth bonding and mentorship with program staff and community volunteers
SPRINGFIELD URBAN LEAGUE 100 NORTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0765550	501(C)3	17,967				Wee Grow Learning Center - An educational program primarily for infants to 5 year olds The program takes into account Early Learning Benchmarks and Standards and is geared toward preparing children and families for their next education phase (Head Start, Kindergarten)
THE PARENT PLACE 314 SOUTH GRAND AVENUE WEST SPRINGFIELD, IL 62704	37-1013939	501(C)3	22,836				Parent Education - Provides positive parenting services to equip parents with the tools necessary to parent effectively and consistently, decreasing the risks of child abuse and neglect
THE PARENT PLACE 314 SOUTH GRAND AVENUE WEST SPRINGFIELD, IL 62704	37-1013939	501(C)3	22,354				Relatives as Parents Network (RAPN) - Bi-weekly, two hour meeting designed as an educationally based support group Provides the opportunity to education, support, refer and offer a brief respite to relative caregivers and the children for whom they have assumed responsibility
UNITED CEREBRAL PALSY 130 NORTH SIXTEENTH STREET SPRINGFIELD, IL 62794	37-0902106	501(C)3	31,600				Children's Assistive Technology - Assistive technology is, "any item, piece of equipment, or product system that is used to increase, maintain or improve functional capabilities of individuals with disabilities" (Individual's with Disabilities Education Act) UCP's Assistive Technology Program helps children develop the skills needed to succeed in school and become integrated, equals in the community
UNITED CEREBRAL PALSY 130 NORTH SIXTEENTH STREET SPRINGFIELD, IL 62794	37-0902106	501(C)3	8,357				Children's Camps - UCP camping programs include Overnight/Recreational Camp, Youth Education and Socialization (YES!) Club, Play Groups and Life Without Limits Camp, an eight-week educational camp for children and youth ages 6-21 with any disability

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AMERICAN CANCER SOCIETY 687 EAST LINTON SPRINGFIELD, IL 62703	36-2167721	501(C)3	7,374				Designations - Donor directed donations, available for the agency's general use
AMERICAN RED CROSS 1045 OUTER PARK DRIVE SPRINGFIELD, IL 62705	37-0661488	501(C)3	40,100				Designations - Donor directed donations, available for the agency's general use
BIG BROTHER BIG SISTER OF SANGAMON COUNTY 444 SOUTH GRAND AVE WEST SPRINGFIELD, IL 62704	37-0997310	501(C)3	20,916				Designations - Donor directed donations, available for the agency's general use
BOY SCOUTS OF AMERICA - AL COUNCIL 5231 SOUTH SIXTH STREET ROAD SPRINGFIELD, IL 62703	22-1576300	501(C)3	28,995				Designations - Donor directed donations, available for the agency's general use
BOYS & GIRLS CLUB OF CENTRAL ILLINOIS 300 SOUTH FIFTEENTH STREET SPRINGFIELD, IL 62705	37-0752849	501(C)3	18,064				Designations - Donor directed donations, available for the agency's general use
CATHOLIC CHARITIES OF SPRINGFIELD 120 SOUTH ELEVENTH STREET SPRINGFIELD, IL 62703	37-0661499	501(C)3	57,431				Designations - Donor directed donations, available for the agency's general use
CENTRAL ILLINOIS FOOD BANK 2000 EAST MOFFAT SPRINGFIELD, IL 62791	37-1106465	501(C)3	53,603				Designations - Donor directed donations, available for the agency's general use
FAMILY SVC CENTER OF SANGAMON COUNTY 730 EAST VINE STREET SPRINGFIELD, IL 62703	37-0681513	501(C)3	8,858				Designations - Donor directed donations, available for the agency's general use
GIRL SCOUTS OF CENTRAL IL 3020 BAKER DRIVE SPRINGFIELD, IL 62703	37-0681529	501(C)3	14,798				Designations - Donor directed donations, available for the agency's general use
HABITAT FOR HUMANITY 1514 EAST JEFFERSON STREET SPRINGFIELD, IL 62702	37-1250364	501(C)3	15,134				Designations - Donor directed donations, available for the agency's general use

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HELPING HANDS OF SPRINGFIELD200 SOUTH ELEVENTH STREET SPRINGFIELD,IL 62703	37-1255889	501(C)3	15,783				Designations - Donor directed donations, available for the agency's general use
HOPE SCHOOL15 EAST HAZEL DELL LANE SPRINGFIELD,IL 62712	37-0768616	501(C)3	5,000				Designations - Donor directed donations, available for the agency's general use
LAND OF LINCOLN GOODWILL INDUSTRIES 800 NORTH TENTH STREET SPRINGFIELD,IL 62792	37-0661254	501(C)3	7,217				Designations - Donor directed donations, available for the agency's general use
LUTHERN CHILD & FAMILY SERVICES400 SOUTH GRAND AVENUE WEST SPRINGFIELD,IL 62704	36-2167778	501(C)3	14,000				Designations - Donor directed donations, available for the agency's general use
MEMORIAL HOME SERVICES720 NORTH BOND STREET SPRINGFIELD,IL 62702	37-1190216	501(C)3	17,996				Designations - Donor directed donations, available for the agency's general use
MENARD COUNTY UNITED FUNDPO BOX 108 TALLULA,IL 62688	37-6049371	501(C)3	21,948				Designations - Donor directed donations, available for the agency's general use
MENTAL HEALTH CENTERS OF CENTRAL ILLINOIS710 NORTH EIGHTH STREET SPRINGFIELD,IL 62702	37-0646367	501(C)3	13,702				Designations - Donor directed donations, available for the agency's general use
MERCY COMMUNITIES INC108 EAST COOK STREET SPRINGFIELD,IL 62703	37-1383599	501(C)3	6,033				Designations - Donor directed donations, available for the agency's general use
MINI O'BEIRNE CRISIS NURSERY1011 NORTH SEVENTH STREET SPRINGFIELD,IL 62702	37-1242640	501(C)3	42,712				Designations - Donor directed donations, available for the agency's general use
PRAIRIELAND UNITED WAY200 WEST DOUGLAS JACKSONVILLE,IL 62651	37-6039121	501(C)3	5,831				Designations - Donor directed donations, available for the agency's general use

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PRAIRIE CENTER AGAINST SEXUAL ASSAULT3 OLD STATE CAPITAL PLAZA SPRINGFIELD,IL 62701	37-1045364		7,901				Designations - Donor directed donations, available for the agency's general use
RUTLEDGE YOUTH FOUNDATION534 WEST MILLER STREET SPRINGFIELD,IL 62702	37-0706724		9,042				Designations - Donor directed donations, available for the agency's general use
SENIOR SERVICES OF CENTRAL ILLINOIS701 WEST MASON STREET SPRINGFIELD,IL 62702	37-0895193		14,889				Designations - Donor directed donations, available for the agency's general use
SOJOURN SHELTER & SERVICES1800 WESTCHESTER BLVD SPRINGFIELD,IL 62704	51-0139118		32,511				Designations - Donor directed donations, available for the agency's general use
SPARC232 BRUNS LANE SPRINGFIELD,IL 62702	37-0717761		26,230				Designations - Donor directed donations, available for the agency's general use
SPRINGFIELD URBAN LEAGUE100 NORTH ELEVENTH STREET SPRINGFIELD,IL 62703	37-0765550	501(C)3	14,831				Designations - Donor directed donations, available for the agency's general use
SPRINGFIELD YMCAPO BOX 155 SPRINGFIELD,IL 62705	37-0661263	501(C)3	13,181				Designations - Donor directed donations, available for the agency's general use
ST JOHN'S FOUNDATION800 EAST CARPENTER STREET SPRINGFIELD,IL 62769	37-0661238	501(C)3	5,992				Designations - Donor directed donations, available for the agency's general use
ST JUDE'S CHILDREN RESEARCH HOSPITAL PO BOX 50 MEMPHIS,TN 38101	62-0646012	501(C)3	9,540				Designations - Donor directed donations, available for the agency's general use
THE PARENT PLACE314 SOUTH GRAND AVENUE WEST SPRINGFIELD,IL 62704	37-1013939	501(C)3	5,458				Designations - Donor directed donations, available for the agency's general use

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UNITED CEREBRAL PALSY 130 NORTH SIXTEENTH STREET SPRINGFIELD, IL 62794	37-0902106	501(C)3	13,481				Designations - Donor directed donations, available for the agency's general use
YOUTH SERVICE BUREAU 2901 NORMANDY ROAD SPRINGFIELD, IL 62703	36-1015851	501(C)3	5,195				Designations - Donor directed donations, available for the agency's general use

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue
Service

▶ 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.

Name of the organization
United Way of Central Illinois Inc

Employer identification number

37-0716060

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	STRENGTHENING FAMILIES- PROJECTS AND INITIATIVES PROVIDING SOCIAL, EMOTIONAL AND ECONOMIC SUPPORT AND STABILITY FOR FAMILIES INCLUDES PROGRAMS WHICH ARE FOCUSED ON PARENTING EDUCATION, PREVENTION OF ABUSE AND NEGLECT, RESPITE FOR FAMILIES CARING FOR A PERSON WITH DISABILITIES, AND COUNSELING, ADVOCACY AND LEGAL ASSISTANCE Expenses \$ 1272546 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		ALL CONTRIBUTORS ARE CONSIDERED TO BE MEMBERS OF THE UNITED WAY OF CENTRAL ILLINOIS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		ALL MEMBERS ARE ALLOWED TO VOTE FOR THE BOARD OF DIRECTORS AT THE ANNUAL MEETING OF THE UNITED WAY OF CENTRAL ILLINOIS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE DIRECTOR OF FINANCE REVIEWS THE FORM 990 BEFORE IT IS FILED Beginning IN 2009, the form 990 will be reviewed by the finance committee with a copy PROVIDED TO ALL BOARD MEMBERS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		PRIOR TO A VOTE ON ANY MATTER CONCERNING DISBURSAL OF FUNDS OR ENGAGEMENT OF THIRD PARTIES RELATIVE TO ORGANIZATIONAL BUSINESS, EACH VOTING BOARD MEMBER IS REQUIRED TO INDICATE WHETHER THEY HAVE ANY CONFLICT OF INTEREST WITH RESPECT TO SUCH VOTE

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND TOP MANAGEMENT OFFICIALS ARE DETERMINED BY THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS SUBJECT TO BOARD APPROVAL. COMPARABILITY DATA AND ADVISORY OPINIONS ARE USED TO DETERMINE COMPENSATION.

Identifier

Return Reference

Explanation

Form 990, Part VI, Section C, line 19

NO DOCUMENTS AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
FORM 990, PAGE 11, PART XI, LINE 2B	OVERSIGHT OF INDEPENDENT ACCOUNTANT	THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. THE FINANCE COMMITTEE ACTING AS THE AUDIT COMMITTEE OVERSEES THE AUDIT AND SELECTION OF INDEPENDENT ACCOUNTANT

