

Return of Organization Exempt From Income Tax

2008

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

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30, 2009

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.

UNITED WAY OF EASTERN MAINE
24 SPRINGER DRIVE #201
BANGOR, ME 04401-3621

D Employer identification number: 01-0211478

E Telephone number: (207) 941-2800

G Gross receipts \$: 4,069,915.

F Name and address of principal officer: JOHN KUROPCHAK
SAME AS C ABOVE

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)

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

J Website: WWW.UNITEDWAYEM.ORG

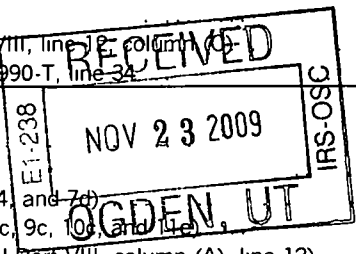
K Type of organization: Corporation Trust Association Other

L Year of formation: 1937

M State of legal domicile: ME

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	<u>THE MISSION OF UNITED WAY OF EASTERN MAINE IS TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF PEOPLE AND COMMUNITIES THROUGH THREE KEY STRATEGIES - IMPROVING THE HEALTH, EDUCATION AND INCOME OF OUR COMMUNITY MEMBERS IN THE FIVE COUNTIES WE SERVE</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	15
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5	Total number of employees (Part V, line 2a)	5	20
	6	Total number of volunteers (estimate if necessary)	6	830
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (A)	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	4,263,488.	3,881,237.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	117,754.	134,166.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10, and 11e)	63,673.	39,942.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,449,860.	4,064,691.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,471,540.	2,902,772.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	659,288.	711,284.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 428,290.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	463,535.	384,962.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,618,909.	3,999,018.
19	Revenue less expenses Subtract line 18 from line 12	-169,049.	65,673.	
Not Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
	21	Total liabilities (Part X, line 26)	3,578,503.	2,976,498.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,591,822.	1,203,944.
			1,986,681.	1,772,554.



Part II Signature Block

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

Signature of officer: *John Kuropchak* Date: 11/16/09

Type or print name and title: *John Kuropchak, President* *Karla McDougald, VP Finance Admin*

Preparer's signature: *Donald E. Hinds CPA* Date: 11/13/09

Check if self-employed:

Preparer's identifying number (see instructions): N/A

Firm's name (or yours if self-employed), address, and ZIP + 4: LOISELLE, GOODWIN & HINDS
1 MERCHANTS PLAZA, SUITE 703
BANGOR, ME 04402-0939

EIN: N/A

Phone no: (207) 990-4585

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

516 8

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If 'Yes,' describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,077,440. including grants of \$ 2,011,072.) (Revenue \$ 134,166.)

SEE SCHEDULE O

4b (Code:) (Expenses \$ 532,351. including grants of \$ 477,971.) (Revenue \$)

SEE SCHEDULE O

4c (Code:) (Expenses \$ 189,211. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4d Other program services. (Describe in Schedule O) SEE SCHEDULE O

(Expenses \$ 525,307. including grants of \$ 413,729.) (Revenue \$)

4e Total program service expenses \$ 3,324,309. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If 'Yes,' complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If 'Yes,' complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III..</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If 'Yes,' complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If 'Yes,' complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? <i>If 'Yes,' complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X

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Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
1 a	31		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1 b	0		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2 a	20		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	X	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3 b	If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4 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.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 c	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6 a	Did the organization solicit any contributions that were not tax deductible?		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
7 e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7 h	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966?		
9 b	Did the organization make any distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10 a	Initiation fees and capital contributions included on Part VIII, line 12.		
10 b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11 a	Gross income from other members or shareholders.		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.		

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

Section A. Governing Body and Management

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

	Yes	No
1 a Enter the number of voting members of the governing body		
1 b Enter the number of voting members that are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? SEE SCH O	X	
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?		X
9 a Does the organization have local chapters, branches, or affiliates?		X
b 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 SEE SCHEDULE O	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers of key employees of the organization? SEE SCHEDULE O Describe the process in Schedule O (see instructions)	X	
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b 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. Disclosures

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ ME
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. **SEE SCHEDULE O**
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization.
 ▶ KARLA MCDUGOLD 24 SPRINGER DRIVE BANGOR ME 04401 (207) 941-2800

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

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

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

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

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KENNETH HEWS DIRECTOR	1	X					0.	0.	0.	
STEPHANIE COTSIRILOS DIRECTOR	1	X					0.	0.	0.	
AMY COTTON DIRECTOR	1	X					0.	0.	0.	
JIM MILLER DIRECTOR	1	X					0.	0.	0.	
NICHI FARNHAM DIRECTOR	1	X					0.	0.	0.	
ROBERT FOSTER DIRECTOR	1	X					0.	0.	0.	
JOHN DIAMOND DIRECTOR	1	X					0.	0.	0.	
JOHN HANSON DIRECTOR	1	X					0.	0.	0.	
JOHN KUROPCHAK EXECUTIVE DIREC	44			X			24,094.	0.	10,046.	
ANDREW HAMILTON CLERK	1	X		X			0.	0.	0.	
ROBERT SUTCLIFFE, ESQUIRE CHAIR	1	X		X			0.	0.	0.	
DEBORAH SANFORD VICE CHAIR	1	X		X			0.	0.	0.	
TRACY HARDING TREASURER	1	X		X			0.	0.	0.	
ROBERT MONTGOMERY-RICE DIRECTOR	1	X					0.	0.	0.	
MICHAEL JONES TREASURER	1	X		X			0.	0.	0.	
KARLA MCDOUGOLD VP FINANCE & AD	46			X			68,796.	0.	10,972.	
KASSIE STEVENS DIRECTOR	1	X					0.	0.	0.	

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a 52,440.				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 3,828,797.				
	g Noncash contribns included in lns 1a-1f.	\$ 176,411.				
	h Total. Add lines 1a-1f	▶ 3,881,237.				
PROGRAM SERVICE REVENUE	2 a <u>SERVICE FEES</u>	Business Code	134,166.	134,166.		
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶ 134,166.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)	▶ 39,134.			39,134.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other	6,032.			
		b Less: cost or other basis and sales expenses		5,224.		
		c Gain or (loss)		808.		
d Net gain or (loss)	▶ 808.			808.		
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events	▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a <u>MISCELLANEOUS</u>		9,346.			9,346.	
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d	▶ 9,346.					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	▶ 4,064,691.	134,166.	0.	49,288.		

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	2,902,772.	2,902,772.		
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	155,537.	28,703.	98,051.	28,783.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))	0.	0.	0.	0.
7 Other salaries and wages	443,992.	224,790.	40,254.	178,948.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	18,967.	8,875.	358.	9,734.
9 Other employee benefits	48,731.	17,263.	4,680.	26,788.
10 Payroll taxes	44,057.	18,780.	9,366.	15,911.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	21,000.		15,500.	5,500.
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees	1,845.		1,845.	
g Other	48,472.	21,060.	9,190.	18,222.
12 Advertising and promotion	13,011.			13,011.
13 Office expenses	9,835.	5,151.	2,984.	1,700.
14 Information technology	13,342.	5,865.	2,586.	4,891.
15 Royalties				
16 Occupancy	59,097.	30,903.	7,980.	20,214.
17 Travel	12,834.	7,015.	406.	5,413.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	11,335.	3,162.	2,144.	6,029.
20 Interest	1,845.		1,845.	
21 Payments to affiliates	26,364.	12,821.	4,621.	8,922.
22 Depreciation, depletion, and amortization	20,726.	8,217.	4,547.	7,962.
23 Insurance	5,515.	2,457.	908.	2,150.
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 <u>PRINTING AND PUBLICATIONS</u>	38,862.	6,472.	1,184.	31,206.
b <u>SEARCH EXPENSES</u>	28,617.		28,617.	
c <u>COMMUNITY EVENTS</u>	20,418.	7,647.	1,085.	11,686.
d <u>EQUIPMENT RENTAL & MAINTENANCE</u>	16,816.	7,044.	4,607.	5,165.
e <u>CAMPAIGN INCENTIVES</u>	16,750.			16,750.
f All other expenses	18,278.	5,312.	3,661.	9,305.
25 Total functional expenses. Add lines 1 through 24f	3,999,018.	3,324,309.	246,419.	428,290.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
ASSETS	1	Cash – non-interest-bearing	100.	1	100.
	2	Savings and temporary cash investments	910,738.	2	495,029.
	3	Pledges and grants receivable, net	1,254,352.	3	1,346,633.
	4	Accounts receivable, net	17,744.	4	36,960.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	85,237.	9	64,078.
	10a	Land, buildings, and equipment cost basis	183,742.		
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	120,759.	10c	62,983.
	11	Investments – publicly-traded securities	611,436.	11	506,004.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	630,995.	15	464,711.
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,578,503.	16	2,976,498.	
LIABILITIES	17	Accounts payable and accrued expenses	405,314.	17	158,632.
	18	Grants payable	1,174,969.	18	1,022,105.
	19	Deferred revenue	4,706.	19	6,600.
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D	6,833.	25	16,607.
	26	Total liabilities. Add lines 17 through 25	1,591,822.	26	1,203,944.
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	948,008.	27	714,556.
	28	Temporarily restricted net assets	562,300.	28	691,839.
	29	Permanently restricted net assets	476,373.	29	366,159.
	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, and equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances.	1,986,681.	33	1,772,554.
	34	Total liabilities and net assets/fund balances.	3,578,503.	34	2,976,498.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990 Cash Accrual Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If 'Yes' to 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?
- 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?
- b If 'Yes,' did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization: **UNITED WAY OF EASTERN MAINE** Employer identification number: **01-0211478**

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

The organization is not a private foundation because it is: (Please check only one organization.)

- 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or 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 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 is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(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?		

h Provide the following information about the organizations the organization supports

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	3,623,869.	3,499,510.	3,416,860.	4,263,488.	3,881,237.	18,684,964.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 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.						0.
4 Total. Add lines 1-3	3,623,869.	3,499,510.	3,416,860.	4,263,488.	3,881,237.	18,684,964.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,255,729.
6 Public support. Subtract line 5 from line 4						15,429,235.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	3,623,869.	3,499,510.	3,416,860.	4,263,488.	3,881,237.	18,684,964.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	25,481.	32,010.	54,903.	63,673.	39,942.	216,009.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						18,900,973.
12 Gross receipts from related activities, etc (see instructions)					12	457,387.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	81.6%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	78.1%
16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal yr 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 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

UNITED WAY OF EASTERN MAINE

Employer identification number

01-0211478

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

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

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
- | | |
|---|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of certified historic structure |
| <input type="checkbox"/> Preservation of open space | |
- 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Yes No
- 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, 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 the following amounts relating to these items.
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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

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

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

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

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

Part IV Trust, Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	248,747.				
b Contributions					
c Investment earnings or losses	-46,335.				
d Grants or scholarships					
e Other expenditures for facilities and programs	9,860.				
f Administrative expenses					
g End of year balance	192,552.				

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

- a Board designated or quasi-endowment ▶ 50.68 %
- b Permanent endowment ▶ 49.32 %
- c Term endowment ▶ _____ %

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		X

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		109,844.	63,700.	46,144.
e Other		73,898.	57,059.	16,839.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				62,983.

BAA

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)		4,064,691.
2	Total expenses (Form 990, Part IX, column (A), line 25)		3,999,018.
3	Excess or (deficit) for the year Subtract line 2 from line 1		65,673.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV) SEE PART XIV		-279,800.
9	Total adjustments (net) Add lines 4-8		-279,800.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		-214,127.

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	2,884,191.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-279,800.
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	-279,800.
3	Subtract line 2e from line 1	3	3,163,991.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV) SEE PART XIV	4b	900,700.
c	Add lines 4a and 4b	4c	900,700.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,064,691.

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

1	Total expenses and losses per audited financial statements	1	3,098,318.
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	
3	Subtract line 2e from line 1	3	3,098,318.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV) SEE PART XIV	4b	900,700.
c	Add lines 4a and 4b	4c	900,700.
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5	3,999,018.

Part XIV Supplemental Information

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

--- **PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND** ---

--- THE INCOME OF THE ENDOWMENT FUNDS IS EITHER NOT RESTRICTED BY DONORS OR RESTRICTED ---

--- AND/OR DESIGNATED FOR CERTAIN GENERAL AND ADMINISTRATIVE EXPENSES. --- **THUS THE INCOME** ---

--- OF THE ENDOWMENT FUNDS WILL BE USED TO SUPPORT THE ORGANIZATION'S GENERAL AND ---

--- ADMINISTRATIVE EXPENSES. ---

2008

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION PAGE 6

UNITED WAY OF EASTERN MAINE

01-0211478

**SCHEDULE D, PART XI, LINE 8
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

DEPRECIATION OF INVESTMENTS

TOTAL \$ -279,800.
\$ -279,800.

**SCHEDULE D, PART XII, LINE 4B
OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S**

DESIGNATIONS FOR OUTSIDE ORGANIZATIONS

TOTAL \$ 900,700.
\$ 900,700.

**SCHEDULE D, PART XIII, LINE 4C
OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S**

DESIGNATIONS FOR OUTSIDE ORGANIZATIONS

TOTAL \$ 900,700.
\$ 900,700.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

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

**Open to Public
Inspection**

Name of the organization

UNITED WAY OF EASTERN MAINE

Employer identification number

01-0211478

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<u>ACADIA COMMUNITY ASSOCIATION</u>	<u>04-3746379</u>	<u>501 (C) (3)</u>	<u>12,008.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>AMERICAN LUNG ASSOCIATION OF MAINE</u>	<u>01-0211531</u>	<u>501 (C) (3)</u>	<u>8,783.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>AMERICAN RED CROSS</u>	<u>53-0196605</u>	<u>501 (C) (3)</u>	<u>7,679.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>AMERICAN RED CROSS, PINE TREE CHAPTER</u>	<u>01-0211475</u>	<u>501 (C) (3)</u>	<u>6,601.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>AMERICA'S CHARITIES</u>	<u>54-1517707</u>	<u>501 (C) (3)</u>	<u>9,239.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>AMICUS</u>	<u>01-0314110</u>	<u>501 (C) (3)</u>	<u>37,083.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>ANIMAL CHARITIES OF AMERICA</u>	<u>94-3193389</u>	<u>501 (C) (3)</u>	<u>27,238.</u>	<u>0.</u>			<u>SUPPORT</u>
<u>BANGOR AREA HOMELESS SHELTER</u>	<u>01-0412267</u>	<u>501 (C) (3)</u>	<u>47,598.</u>	<u>0.</u>			<u>SUPPORT</u>

2 Enter total number of section 501(c)(3) and government organizations 83

3 Enter total number of other organizations 0

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

TEEA3901L 12/19/08

Schedule I (Form 990) 2008

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

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization		Employer identification number					
UNITED WAY OF EASTERN MAINE		01-0211478					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II).							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BANGOR AREA VISITING NURSES	01-0379678	501 (C) (3)	18,237.				SUPPORT
BANGOR Y	20-3282977	501 (C) (3)	154,240.				SUPPORT
BIG BROTHERS BIG SISTERS OF MIDC	01-0384833	501 (C) (3)	5,145.				SUPPORT
BROADREACH FAMILY AND COMMUNITY	01-0471985	501 (C) (3)	13,820.				SUPPORT
BUCKSPORT AREA CHILD CARE CENTER	01-0449192	501 (C) (3)	14,334.				SUPPORT
CAMP SUNSHINE AT SEBAGO LAKE	22-2582877	501 (C) (3)	6,348.				SUPPORT
CANCERCURE OF AMERICA: CARE, UND	81-0648432	501 (C) (3)	18,705.				SUPPORT
CENTER ON AGING - RSVP	01-6000769	501 (C) (3)	26,959.				SUPPORT
CHARLOTTE WHITE CENTER	22-2582271	501 (C) (3)	19,117.				SUPPORT

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

3 Enter total number of other organizations

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2008

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

Open to Public Inspection

Name of the organization		Employer identification number						
UNITED WAY OF EASTERN MAINE		01-0211478						
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CHILDREN FIRST - AMERICA'S CHARI	30-0186795	501 (C) (3)		6,899.			SUPPORT	
CHILDREN'S CHARITIES OF AMERICA	94-3148588	501 (C) (3)		12,818.			SUPPORT	
CHILDREN'S MEDICAL CHARITIES OF	27-0093393	501 (C) (3)		11,327.			SUPPORT	
CHRISTIAN CHARITIES USA	94-3255961	501 (C) (3)		7,936.			SUPPORT	
CHRISTIAN SERVICE CHARITIES	94-3193374	501 (C) (3)		23,701.			SUPPORT	
COMMUNITY HEALTH & COUNSELING SE	01-0211483	501 (C) (3)		13,989.			SUPPORT	
COMMUNITY HEALTH CHARITIES	13-6167225	501 (C) (3)		29,838.			SUPPORT	
COMMUNITY HEALTH CHARITIES OF MA	22-2478946	501 (C) (3)		39,728.			SUPPORT	
CONSERVATION & PRESERVATION CHAR	94-3217738	501 (C) (3)		5,439.			SUPPORT	

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

3 Enter total number of other organizations

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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF EASTERN MAINE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOWN EAST AIDS NETWORK	01-0441229	501 (C) (3)	22,211.				SUPPORT
DOWN EAST FAMILY YMCA	01-0412269	501 (C) (3)	29,797.				SUPPORT
DOWNEAST HEALTH SERVICES	01-0317427	501 (C) (3)	76,313.				SUPPORT
EARTH SHARE	52-1601960	501 (C) (3)	7,326.				SUPPORT
EASTERN AREA AGENCY ON AGING	01-0328376	501 (C) (3)	74,230.				SUPPORT
EASTERN MAINE AIDS NETWORK	01-0434502	501 (C) (3)	10,771.				SUPPORT
FAITH IN ACTION COMMUNITY CONNEC	71-0957829	501 (C) (3)	7,976.				SUPPORT
FAMILIES & CHILDREN TOGETHER	01-0483192	501 (C) (3)	14,165.				SUPPORT
FIRST STEP PREGNANCY RESOURCE CE	01-0428432	501 (C) (3)	5,540.				SUPPORT

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

3 Enter total number of other organizations

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

01-0211478

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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF EASTERN MAINE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL IMPACT	52-1273585	501 (C) (3)	18,269.				SUPPORT
GOOD SAMARITAN AGENCY	01-0211507	501 (C) (3)	70,018.				SUPPORT
GOOD SHEPHERD FOOD BANK	22-2986809	501 (C) (3)	5,083.				SUPPORT
HEALTH & MEDICAL RESEARCH CHARIT	94-3217739	501 (C) (3)	18,212.				SUPPORT
HOME HEALTH AND HOSPICE - ST. JO	01-0422885	501 (C) (3)	5,054.				SUPPORT
HUMAN CARE CHARITIES OF AMERICA	94-3067804	501 (C) (3)	5,872.				SUPPORT
I CARE MINISTRIES	01-0528770	501 (C) (3)	5,652.				SUPPORT
ISLAND CONNECTIONS	04-3386167	501 (C) (3)	8,228.				SUPPORT
KATAHDIN AREA COUNCIL, BOY SCOUT	01-0211489	501 (C) (3)	13,415.				SUPPORT

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

3 Enter total number of other organizations

Continuation Sheet for Schedule I (Form 990)

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

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number
01-0211478

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

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

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

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization		Employer identification number						
UNITED WAY OF EASTERN MAINE		01-0211478						
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
KENNEBEC VALLEY HUMANE SOCIETY	01-0266549	501 (C) (3)	6,682.				SUPPORT	
KIDCARE AMERICA	57-1237933	501 (C) (3)	7,073.				SUPPORT	
LEGAL SERVICES FOR THE ELDERLY	01-0359131	501 (C) (3)	6,783.				SUPPORT	
LITERACY VOLUNTEERS OF AMERICA-W	01-0480593	501 (C) (3)	6,325.				SUPPORT	
LITERACY VOLUNTEERS OF BANGOR	23-7409749	501 (C) (3)	17,190.				SUPPORT	
M.A.P.S.	01-0348849	501 (C) (3)	10,500.				SUPPORT	
MAINE MENTAL HEALTH CONNECTIONS	01-0376510	501 (C) (3)	23,006.				SUPPORT	
MAINE NATIONAL GUARD FOUNDATION	01-0450803	501 (C) (3)	9,088.				SUPPORT	
MAINE SEACOAST MISSION	01-0216837	501 (C) (3)	24,367.				SUPPORT	

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

3 Enter total number of other organizations

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

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2008

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

Open to Public Inspection

Name of the organization: **UNITED WAY OF EASTERN MAINE**
Employer identification number: **01-0211478**

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAINESHARE	01-0444245	501 (C) (3)	20,737.				SUPPORT
MAKE-A-WISH FOUNDATION OF MAINE	01-0477512	501 (C) (3)	5,157.				SUPPORT
MANNA MINISTRIES	22-3144381	501 (C) (3)	5,451.				SUPPORT
MEDICAL RESEARCH CHARITIES	94-3148591	501 (C) (3)	5,739.				SUPPORT
MILITARY, VETERANS & PATRIOTIC S	94-3193418	501 (C) (3)	22,007.				SUPPORT
MY FRIENDS PLACE/FIRST UNITED ME	01-0237808	501 (C) (3)	12,261.				SUPPORT
NEW HOPE FOR WOMEN	01-0377246	501 (C) (3)	8,261.				SUPPORT
PARENTS ARE TEACHERS TOO	20-3435737	501 (C) (3)	9,250.				SUPPORT
PENQUITS	01-0541817	501 (C) (3)	81,595.				SUPPORT

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

3 Enter total number of other organizations

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

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2008

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

Open to Public Inspection

Name of the organization		Employer identification number					
UNITED WAY OF EASTERN MAINE		01-0211478					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAPE RESPONSE SERVICES	01-0441773	501 (C) (3)	7,959.				SUPPORT
SHAW HOUSE	01-0495262	501 (C) (3)	89,671.				SUPPORT
SPRUCE RUN ASSOCIATION	01-0358090	501 (C) (3)	69,472.				SUPPORT
THE HOUSING FOUNDATION	23-7046663	501 (C) (3)	17,641.				SUPPORT
THE JACKSON LABORATORY	01-0211513	501 (C) (3)	5,203.				SUPPORT
THE NEXT STEP	01-0482508	501 (C) (3)	42,629.				SUPPORT
THE WARREN CENTER FOR COMMUNICAT	01-0272116	501 (C) (3)	44,849.				SUPPORT
UCP OF MAINE	23-7193853	501 (C) (3)	20,450.				SUPPORT
UMAINE COOPERATIVE EXTENSION PRO	01-6000769	501 (C) (3)	7,480.				SUPPORT

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

3 Enter total number of other organizations

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

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization		Employer identification number					
UNITED WAY OF EASTERN MAINE		01-0211478					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF AROOSTOOK COUNTY	23-7147455	501(C)(3)	22,847.				SUPPORT
UNITED WAY OF GREATER PORTLAND	01-0241767	501(C)(3)	24,789.				SUPPORT
UNITED WAY OF KENNEBEC VALLEY	01-6004404	501(C)(3)	31,093.				SUPPORT
UNITED WAY OF MID COAST	01-6004866	501(C)(3)	23,968.				SUPPORT
UNITED WAY OF MID-MAINE	01-0233280	501(C)(3)	10,609.				SUPPORT
UNITED WAY OF YORK COUNTY	01-0276862	501(C)(3)	8,903.				SUPPORT
WALDO COUNTY YMCA	01-0493123	501(C)(3)	14,303.				SUPPORT
WASHINGTON HANCOCK COMMUNITY AGE	23-7226828	501(C)(3)	83,488.				SUPPORT
WELLSPRING, INC.	22-2632367	501(C)(3)	31,320.				SUPPORT

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

3 Enter total number of other organizations

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

UNITED WAY OF EASTERN MAINE

Employer identification number

01-0211478

Part I Questions Regarding Compensation

1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain

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

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

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

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

a Receive a severance payment or change of control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If 'Yes' to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If 'Yes' to line 6a or 6b, describe in Part III.

7 For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III

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

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

Schedule J (Form 990) 2008

**SCHEDULE M
(Form 990)**

Non-Cash Contributions

OMB No 1545-0047

2008

**Open to Public
Inspection**

► To be completed by organizations that answered 'Yes'
on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED WAY OF EASTERN MAINE

Employer identification number

01-0211478

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles		1	13,000.	MARKET VALUE
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded		12	24,448.	MEAN VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (FOOD _____)		0	135,213.	WEIGHT
26 Other ► (MISCELLANEOUS _____)		0	6,750.	MARKET VALUE
27 Other ► (_____)				
28 Other ► (_____)				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) 2008

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

United Way of Eastern Maine

Employer identification number

01:0211478

Mission-Related

The mission of United Way of Eastern Maine is to improve lives by mobilizing the caring power of people and communities. We will achieve our mission through three key strategies – improving the Health, Education and Income of our community members in the five counties we serve. To accomplish this we work with partners, including agencies, volunteers and our business community to create positive changes for children and families, senior citizens and those needing help to meet their basic needs. This year we began a new initiative called Neighbors Helping Neighbors to address critical gaps in heating and weatherization. We also partnered with Bucksport Bay Early Childhood Network, Eastern Maine CA\$h Coalition and the National Association of Letter Carriers. We are in the final stages of two initiatives to support our senior citizens ability to access transportation to their medical appointments and to prevent life altering falls. To find out more read Part III and Schedule O of this return or visit our website at www.unitedwayem.org.

Part III 4a

Agency Financial Support – Grants and Designations

Through a community needs assessment conducted in 2003 in our five county region, United Way of Eastern Maine identified three impact areas: Strengthening Children and Families, Supporting Seniors, and Meeting Basic Needs and Promoting Self-Sufficiency. Volunteer Community Impact Councils were developed for each of these impact areas, and the Councils then developed specific outcomes for that impact area. Programs seeking funding from United Way of Eastern Maine must apply under one of the impact areas, and address one of the outcomes.

Strengthening Children and Families Community Impact Council

Vision Statement: United Way of Eastern Maine envisions a region in which communities and their citizens actively support the well being, development and aspirations of all children and

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

United Way of Eastern Maine

Employer identification number

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families through relationships, resources, and policies that are coordinated, compassionate, effective and easy to use.

Outcome #1: Children enter school ready to learn and succeed.

Target Population: Children under age 6 and their families

of programs funded = 14

Total \$ allocated to these 14 programs = \$167,481

Outcome #2: Children and Youth increase assets and skills in order to increase their ability to accept and take personal responsibility, plan and make good choices, resist negative peer pressure and decrease vulnerability to dangerous situations.

Target Population: Children and youth ages 5 to 18 and their families

of programs funded = 25

Total \$ allocated to these 25 programs = \$428,599

Supporting Seniors Community Impact Council

Vision Statement: Older adults are as active and independent as possible and their caregivers have the support and resources they need.

Outcome #1: People access services to meet basic needs in times of crisis.

Target Population: Seniors living alone or with an unpaid adult as their primary caretaker.

of programs funded = 8

Total \$ allocated to these 8 programs = \$71,322

Outcome #2: Seniors live productive, active, healthy lifestyles by contributing to and benefitting from community resources.

of programs funded = 8

Total \$ allocated to these 8 programs = \$90,545

Meeting Basic Needs and Self-Sufficiency

Vision Statement: All people have the opportunity to become self-sufficient and to participate in community life. Basic needs are met with dignity and respect.

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Outcome #1: People access services to meet basic needs in times of crisis.

Target Population: People in crisis, including youth and families

of programs funded = 6

Total \$ allocated to these 6 programs = \$157,755

Outcome #2: People access transitional services to achieve stability in their lives

Target Population: Adults transitioning from crisis to self-sufficiency

of programs funded = 7

Total \$ allocated to these 7 programs = \$89,888

Outcome #3: People access services to maintain self-sufficiency.

Target Population: Adults who have overcome crisis and are working to maintain their self-sufficiency

of programs funded = 7

Total \$ allocated to these 7 programs = \$104,782

In addition to the agency grants, \$900,700 was donor directed to agencies. These agencies can use these funds in whatever manner best serves their organizations.

Part III 4b

Camp Bangor

Camp Bangor is a free camp program available to all Bangor Public School children in grades 3-6 (for summer of 2009 it became grades 4-6). The Libra Foundation provides funding each year for this program. United Way and Libra believes that providing this opportunity to many of the neediest students will result in increased aspirations and self-confidence, new career goals and better social interactions with other children that in the end, will build a better future for these children. Children have access to science camps, sports, martial arts, culinary or arts camps. programs that will engage the interest in most any child. Reaching the most needy children is especially difficult and UWEM enlisted the help of a retired teacher to reach out and assist the families that need special help. This might include home visitations, assistance with arranging medical physicals, coordination of

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transportation and in many cases, just help in filling out the necessary paperwork due to literacy issues. In the summer of 2008:

189 at-risk students and their families received additional support;
52% of those at-risk students submitted applications and attended camps;
80% of all eligible children in the Bangor schools went to camp and
\$583,000 in scholarships was paid to Maine summer camps.

Part III 4c

General Community Support

1. Works as a convener and collaborator

a. Department of Health and Human Services (DHHS) - in light of anticipated significant budget shortfalls, met with DHHS commissioner to examine approaches to delivery of services by area providers and consumers in United Way catchment areas. State shortfalls will be in the areas of prevention, advocacy and respite. United Way of Eastern Maine and partners will attempt to address these shortfalls.

b. Navigating Rough Seas – January 2009, a half-day forum which brought area non-profits together to discuss the difficulties in the current economic environment and how working together might result in stronger non-profits. Some of the results of this session included non-profit representatives meeting with legislators to discuss regional duplication of services; possible opportunities for consolidation of regional services and exploration of pooling resources around back room efficiencies.

2. Collaborated with agency partners to further develop a more timely, less cumbersome and more comprehensive application and funding process. Led volunteer review of funded programs in this mid-cycle year to determine progress toward the goals and outcomes upon which the grants were awarded. Reviews will be concluded in August of 2009 and evaluation of each program's progress toward stated goals will be reviewed.

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3. General Agency Support

a. Logic Model training is provided to funded programs/agencies as requested throughout the year. This is generally a result of new staff coming into a program. In addition, general community trainings are provided periodically. Feedback we have received is that these trainings are very valuable in applying for other grants.

b. A focus has been to develop an improved relationship with Washington and Hancock Counties. A significant amount of energy has been spent working with two major networks in that geographic area: Washington County: One Community, and the Community Caring Collaborative.

c. UWEM is also a member of a Nonprofit Sector Viability Collaborative that was established by a group of Maine-based 'field-building' organizations and funders who identified an urgent need to assist Maine nonprofits, many of whom are facing steep fiscal and organizational challenges brought on by the current economic crisis. Downeast (Washington and Hancock Counties) was identified as a pilot site for the Viability Program. United Way of Eastern Maine was the point agency for recruiting a cohort beginning in the spring for a clinic to be held in very early fall, 2009.

d. Relationship building with our funded partners has been a major focus in this, the first year of our 2 year funding cycle. Face-to-face contacts with program managers/directors, and agency executive directors to foster an understanding of our mutual goals, and how we can best work together to address community needs have been a priority.

4. Training for Outcomes

United Way of Eastern Maine provides trainings for outcomes to area non-profits in each of its five county area of service. Timelines and grids provide templates for step-by-step completion by agencies to help them drill down anticipated outcomes, timeframe for completion and numbers/demographics served.

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Schedule O - Additional Program Information

Eastern Maine Funders' Initiative

Begun in 2007, with work continuing through 2008, United Way of Eastern Maine combined forces with 18 funders and 6 initiative partners in response to threateningly high prices of petroleum prices.

Furnace repair and cleanups—Impact: Fuel expenses are reduced and homes are safer. Dead River, R. H. Foster and Webber Energy donated all the labor and materials to clean 100 home oil burner heating systems. This donation was valued in excess of \$7500. Boilers in need of repair or replacement were identified and work was funded through Eastern Maine Funders energy dollars, resulting in substantial savings in heating costs and safer homes for families.

Fuel Assistance Impact—Impact: Temporary relief in finances and ability to stay in a warm home. 287 families across Eastern Maine were given a hand with fuel assistance allowing them to use any available funds for food, healthcare and other necessities. Without this assistance, many families would face the challenges of seeing other shelter.

Weatherization—Impact: Lower annual fuel expenses and energy conservation. We see a 15% savings (on average) in heating expenses as a result of weatherization to the average low-income home in Maine, according to the U.S. Department of Energy and Maine State Housing authority. At \$2.50 per gallon, this is a savings of \$375 each winter for up to 15 years and a substantial conservation savings in fuel oil. Based on a report from partner agency Washington Hancock Community Association, actual sampling indicates average savings on Eastern Maine Funders' weatherization projects is 37%.

Neighbors Helping Neighbors—Impact: Energy conservation, emergency care, socialization, education and community synergy. In 2009, United Way of Eastern Maine developed *Neighbors Helping Neighbors*, a small grant program designed to engage a diversity of community members including informal groups, organizations, local governments, businesses, faith based groups, schools, individuals and others in identifying, planning and implementing community programs focused on helping

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neighbors meet the challenges of Maine's winter. 638 families were helped through the grant program that invested \$34,000 in local Eastern Maine Communities. The grants:

• Supported and encouraged community members to work together toward a common goal;

• Increased impact through leveraging granted dollars with match donations and/or in-kind donations;

- Encouraged the engagement of local and community volunteers;
- Connected state and federal resources with local communities and
- Empowered eastern Maine communities to provide programs to ensure their neighbors stay warm, fed and safe throughout the winter.

All five of our counties received funding from this program that:

- Provided weatherization to neighbors by local volunteers using donated or favorably priced winterizing and weatherization supplies;
- Provided warming centers for the coldest of days;
- Provided food;
- Supported neighborhood watch groups to check on area residents most at risk;
- Trained the general public in energy saving methods;
- Provided fuel for families and individuals in crisis;
- Reduced home health and safety issues;
- Increased the food security of families and individuals

Lesson learned? With a small amount of seed money, caring individuals and communities that work together, can make a difference in the lives of so many people in Eastern Maine.

Eastern Maine CASH Coalition

Eastern Maine CASH coalition provides free tax preparation assistance to low income families and seniors. The coalition includes Penquis, WHCA (Community Action

Program agencies), AARP, Women Work and Community, HUD, the Casey

Foundation, and IRS, with UWEM as the coalition coordinator. A large event, called

~~Super Saturday was held in February at 2 sites: the Airport Mall in Bangor, and WHCA~~

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in Ellsworth. Other free tax preparation sites are Old Town, the Passamaquoddy reservation at Pleasant Point, Machias, Calais, Stonington, and Dover-Foxcroft. In Washington County, Machias Savings Bank and the University of Maine at Machias provided preparation sites. The coalition seeks to increase the amount of Earned Income Tax Credit returned to Maine families, provide financial counseling and eliminate the need for people to pay high premiums to receive early refunds. This puts more money in the pockets of Maine families that will allow them to heat their homes, provide food for the families, seek medical care, buy medications, further their education or even buy their first home. Volunteers in 2009 filed more than 2,750 free tax returns with an estimated \$2,300,000 returned to the Eastern Maine economy.

NALC Food Drive

Each year United Way of Eastern Maine works with the National Association of Letter Carriers (NALC) in our five counties to provide food to our local food banks. One Saturday in May is designated as the NALC food drive. Notices are placed in peoples mailboxes asking them to leave food out on this Saturday that will be picked up by their letter carrier. Volunteers pick up food from the carriers and take it back to the distribution center where more volunteers sort, weigh and finally distribute the food to local pantries. UWEM provides overall support for this project including volunteer recruitment and coordination, development, printing and distribution of materials pre and post event, facilitating the distribution of food, media relations and mailing thank you post cards to participants.

This year, over 90,000 lbs of food was donated with an estimated value of over \$135,000. Each year the food drive is another volunteer opportunity for school age children, parents, seniors and community members to come together and support the neediest in our communities.

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Children and Families

United Way of Eastern Maine envisions a region in which communities and their citizens actively support the well-being, development and aspirations of all children and families through relationships, resources, and policies that are coordinated, compassionate, effective and easy to use.

Bucksport Bay Early Childhood Network

The Goal of the United Way of Eastern Maine's *Born Learning*™-School Readiness Initiative is to ensure that children and families have the supports they need for children to enter school ready to learn. The focus is on long-term, sustainable systemic change targeting root causes that focus on Education, Income and Health, the building blocks of a good life. The goal is better outcomes related to school readiness for the children in Bucksport, Maine. The Bucksport Bay Early Childhood Network (BBECN) was selected from six communities during an RFP process. The pilot initiative formally began with the development and signing of an Memorandum of Understanding in October 2008. Using a framework developed as part of the *Born Learning* public awareness campaign, the five-year strategy adheres to three key ideas: 1) to increase awareness of key issues, 2) to provide education and 3) opportunities for action.

Supporting Seniors

Older adults are as active and independent as possible and their caregivers have the support and resources they need.

Senior health transportation collaborative - When this project was conceived, it was under the assumption that there was a shortage of public or otherwise available transportation for seniors. Seniors were missing doctors appointments and treatments because relatives were not available to transport them, they were too frail to use public transportation, or too intimidated to do so. After two years of collaborative work with Eastern Maine Healthcare Systems, St. Joseph's Hospital, Health Access Network, Bucksport Healthy Communities, WHCA, Penquis, and an in-kind contribution of web-technology by Sèphone Internet

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Solutions, it was determined that there was transportation available, but was being under-utilized. As a result, a new information network has been established linking caregivers with consumers. It will go live before the end of 2009.

Senior Falls Initiative - It is recognized as fact that the single most debilitating injuries sustained by the senior population are a result of falls in the home. Through partnerships with Eastern Area Agency on Aging's *Matter of Balance* program, a lay-trainer program offered by University of Husson's Physical therapy program and the University of Maine Center on Aging, United Way of Eastern Maine is engaged in educating the senior population about the dangers of falls in the home. Recruitment and training of lay leaders and coaches is currently underway. Community education and clinics will begin by the end of 2009.

2-1-1 Maine

2-1-1 is an easy to remember telephone number that connects people to a full range of health and human service resources in their community. It is free, confidential and anonymous, and available 24 hours a day, 7 days a week. The 2-1-1 Maine directory currently includes over 9,000 resources. Trained Information & Referral Specialists, who receive the calls and quickly assess the caller's needs, will refer the caller to the appropriate resources for help and assistance. 2-1-1 Maine also has an in-state/out-of-state toll free number and is accessible by internet at www.211maine.org.

	Fiscal Year '08	Fiscal Year '09
County	Total 2-1-1 Calls Received	Total 2-1-1 Calls Received
Hancock	908	1,375
Penobscot	5,414	6,481
Piscataquis	360	548
Waldo	797	1,120
Washington	776	1,009
TOTALS	8,255	10,533

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Fiscal Year 2009 Top Call Referral Categories for the five-county region:

1) Heating Assistance	1,813 calls	15%
2) Utilities Assistance	1,087 calls	9%
3) Housing/Shelter	848 calls	6%
4) Mental Health Services	744 calls	6%
5) Substance Abuse Services	510 calls	4%
6) Tax Assistance	433 calls	4%

Form 990, Part VI, Line 4 – Significant Changes to Organizational Documents

The United Way of Eastern Maine (UWEM) revised its By Laws in February 2009 to reflect changes in the organizations mission and direction. These revisions were approved by the UWEM Board of Directors at their regularly scheduled February 19, 2009 meeting. Below are the substantive areas that were revised.

Mission/Purpose and Guiding Principles – This section was expanded to include the new mission of the UWEM which is “To improve lives by mobilizing the caring power of people and communities.” The following guiding principles were added: Integrity, Inclusiveness, Teamwork, Communications, Volunteerism, Impact and Community Leadership.

Board of Directors and Officers - In the sections related to the UWEM Board of Directors (Article V) there were no changes to the number of members, number of meetings, or quorum requirements. The attendance requirement was established at 75% of the regularly scheduled meetings. Section 8 was added to permit the utilization of meeting by teleconference. In the section describing the officers (Article VII) the position of Secretary/Clerk was added.

Permanent Committees of the Board of Directors - Article VIII was expanded to include the formation of 3 new permanent/standing committees which are Community Stewardship Committee, Resource Development Committee, and Marketing/ Communications Committee. The current 3 standing committees (Governance Committee, Executive Committee and the

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Finance and Audit Committee) had new charters written with membership and quorum requirements included. These charters were adopted by the board. In some cases, their roles were expanded to include additional responsibilities. The Finance Committee became the Finance and Audit Committee and the Executive Committee assumed the responsibility of executive compensation and personnel review prior to submission to the Board of Directors.

Additional Articles -- There were 5 Articles added to the By-Laws to cover various areas. Article IX was added to describe the UWEM relationship with supported agencies and programs. Four new articles were added to describe fiscal and reporting matters. Article X was added to describe policies on contracts, checks, deposits and funds. Article XI describes policies related to Books and Records. Article XII sets the UWEM fiscal year as July 1 through June 30th. Article XVI was added and describes the contents of the annual report.

Form 990, Part VI, Line 10 – Form 990 Review Process

The 990 is reviewed by the Finance and Audit Committee prior to submission. If time allows prior to submission, the Finance Committee will report on this at the next meeting. If not, each Board member will receive a written report of the findings of the Finance and Audit committee along with a copy of the return prior to filing.

Form 990, Part VI, Line 12c – Conflict of Interest Compliance Enforcement

Board Members are asked to sign the conflict of interest policy declaring any conflicts they or family members have. A grid with the responses is given to the Board Chair and Governance Committee Chair. At the start of each meeting the Board Chair asks if there are any conflicts with any items on the agenda. If there are the Board member is asked to leave the room during deliberations.

Form 990, Part VI, Line 15b – Executive Compensation

United Way's executive compensation program is administered by the Executive Committee of

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the Board of Directors. The Executive Committee is responsible for establishing and
maintaining a competitive compensation program for the President, and consulting with the
President regarding the recommendations for senior staff compensation. The Committee
meets to review the compensation program and make recommendations to the Board of
Directors, as appropriate.

The Executive Committee solicits information from various sources including Maine
Association of Nonprofits and the United Way of America Salary Survey to evaluate the
organization's executive compensation program within the market. The evaluation is reviewed
annually and is intended to ensure that the compensation program falls within a reasonable
range of competitive practices for comparable positions among similarly situated organizations.

Following this review, the Committee reviews and approves the President's compensation,
base salary, annual incentive opportunity adjustment, and objectives and goals for the
upcoming fiscal year and consults with the President as to senior staff. The Committee
reviews and recommends to the Board for approval, salary and incentive awards for the
President.

No salary increases were received or approved this year.

Form 990, Part VI, Line 19 - Availability of Documents

United Way of Eastern Maine posts on it's public website the Whistleblower and Conflict of
Interest Policies, organizational By-Laws and the annual audit and 990.