

CEO/CFO IRS Form 990 Certification

CERTIFICATIONS

I hereby certify that:

1. I have read the IRS Form 990 of United Ways of New England, Incorporated for the year ended June 30, 2010.
2. Based on my knowledge, the information included in this return does not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading.
3. Based on my knowledge, the information included in this return is complete and accurate.



Assistant Treasurer

Date

2/19/11



Board Director

Date

3/14/11

Return of Organization Exempt From Income Tax

20

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 07/01, 2009, and ending 06/30, 20 10

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

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

C Name of organization UNITED WAYS OF NEW ENGLAND INC
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
51 Sleeper Street
 City or town, state or country, and ZIP + 4
Boston, MA 02210

D Employer identification number
04 : 2687831

E Telephone number
(617) 624-8000

G Gross receipts \$ 11,391,138

F Name and address of principal officer: United Ways of New England Inc
51 Sleeper Street, Boston, MA 02210

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶ _____

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

J Website: ▶ www.uwone.org

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: 1979 **M** State of legal domicile: MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Each United Way in the UWONE partnership is working to address community issues and challenges in its region in an innovative and collaborative manner. All of the United Ways in this partnership are working to ensure that children enter
(Continued on Schedule O, Statement 1)

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

3 Number of voting members of the governing body (Part VI, line 1a)	<u>3</u>	<u>11</u>
4 Number of independent voting members of the governing body (Part VI, line 1b)	<u>4</u>	<u>9</u>
5 Total number of employees (Part V, line 2a)	<u>5</u>	<u>0</u>
6 Total number of volunteers (estimate if necessary)	<u>6</u>	<u>100</u>
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	<u>0</u>
7b Net unrelated business taxable income from Form 990-T, line 34	<u>7b</u>	<u>0</u>

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	<u>13,582,675</u>	<u>11,390,764</u>
9 Program service revenue (Part VIII, line 2g)	<u>0</u>	<u>0</u>
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>48,750</u>	<u>374</u>
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>0</u>	<u>0</u>
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>13,631,425</u>	<u>11,391,138</u>
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>12,604,017</u>	<u>10,886,232</u>
14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>0</u>	<u>0</u>
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>0</u>	<u>0</u>
16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>0</u>	<u>0</u>
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>0</u>		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	<u>1,189,393</u>	<u>1,131,072</u>
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>13,793,410</u>	<u>12,017,304</u>
19 Revenue less expenses. Subtract line 18 from line 12	<u>-161,985</u>	<u>-626,166</u>

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	<u>10,646,863</u>	<u>9,250,591</u>
21 Total liabilities (Part X, line 26)	<u>7,791,978</u>	<u>7,021,872</u>
22 Net assets or fund balances. Subtract line 21 from line 20	<u>2,854,885</u>	<u>2,228,719</u>

Part II Signature Block

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

Sign Here ▶ Patricia Latimore Signature of officer Date 2/14/11

▶ Patricia Latimore, Assistant Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ N/A Date _____ Check if self-employed Preparer's identifying number (see instructions) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____ EIN ▶ _____ Phone no. ▶ () _____

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

Form **8453-EO**

Exempt Organization Declaration and Signature for Electronic Filing

OMB No. 1545-1879

For calendar year 2009, or tax year beginning 07/01, 2009, and ending 06/30, 20 10

2009

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

▶ See instructions on back.

Name of exempt organization
UNITED WAYS OF NEW ENGLAND INC

Employer identification number
04 : 2687831

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>11,391,138</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2009 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here ▶ Patricia A. Latimore | 2/14/11 ▶ **Patricia Latimore, Assistant Treasurer**
Signature of officer Date Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature ▶ _____	Date _____	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN _____
	Firm's name (or yours if self-employed), address, and ZIP code ▶ _____	EIN _____	Phone no. () _____		

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only	Preparer's signature ▶ _____	Date _____	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN _____
	Firm's name (or yours if self-employed), address, and ZIP code ▶ _____	EIN _____	Phone no. () _____	

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
None

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 \$ 10,886,232 including grants of \$ 10,886,232) (Revenue \$ 0)
United Ways of New England, Inc. (UWONE) is a charitable fundraising support organization and classified as a Type III 509 (a)(3) organization. UWONE was established as a cooperative venture among local, neighboring United Ways in eastern New England for the purposes of planning, coordinating and executing regional fund-raising campaigns directed to selected major business organizations in the area. As of December 1996, the name of the organization was officailly changed to United Ways of New England, Inc. (UWONE). The board of directors is comprised of eleven members, most of whom ar senior executives from participating companies. The board works closely with an advisory committee comprised of CEO's from local United Ways in Massachusetts, Rhode Island and New Hampshire.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ▶ 10,886,232

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>	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	✓	
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>		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		✓
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 similar funds or 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>		✓
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>		✓
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>		✓
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>		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		✓
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	✓	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	✓	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.</i>	12A	✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?		✓
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		✓
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>		✓
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>		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		✓
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		✓

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	✓	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		✓
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>		✓
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		✓
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>		✓
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		✓
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>		✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	✓	
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>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		✓
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>		✓
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>		✓
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>	✓	
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>		✓
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>		✓
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>		✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	0		
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 <i>e-file</i> this return. (see instructions)		
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
3a			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
4a			
b	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
5b			
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		✓
6a			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	✓	
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	✓	
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1a			11
b	Enter the number of voting members that are independent		
1b			9
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?		✓
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?		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?		✓
6	Does the organization have members or stockholders?		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	✓	
b	Each committee with authority to act on behalf of the governing body?	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		✓

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

	Yes	No	
10a	Does the organization have local chapters, branches, or affiliates?	✓	
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?		
10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	✓	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	✓	
12b			
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	✓	
12c			
13	Does the organization have a written whistleblower policy?	✓	
14	Does the organization have a written document retention and destruction policy?	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	✓	
15a			
b	Other officers or key employees of the organization	✓	
15b			
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		✓
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?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► MA
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Patricia Latimore CFO, (617)624-8000
51 Sleeper Street, Boston, MA 02210

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(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			
Gary L Countryman ----- Immediate Past Chairman and Director	2	✓					0	0	0	
Bruce Bacon ----- Director	2	✓					0	0	0	
Michael Durkin ----- Director	2	✓					0	0	0	
James Fowler ----- Director	2	✓					0	0	0	
Philip Grzewinski ----- Director	2	✓					0	0	0	
Charles Jerabek ----- Director	2	✓					0	0	0	
Donald Mattise ----- Director	2	✓					0	0	0	
Robert Powers ----- Director	2	✓					0	0	0	
Paul McDonough ----- Director	2	✓					0	0	0	
Pat Sullivan ----- Director	2	✓					0	0	0	
Mike Killilea ----- Director	2	✓					0	0	0	
Steve Sheehan ----- Director	2	✓					0	0	0	
Michele Courton Brown ----- Director	2	✓					0	0	0	
Richard Moore ----- Chairman and Director	2			✓			0	0	0	
Maura O Banta ----- Secretary	2			✓			0	0	0	
Allen Maltz ----- Treasurer	2			✓			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	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	0				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,390,764				
	g	Noncash contributions included in lines 1a-1f: \$		110,091				
	h	Total. Add lines 1a-1f		11,390,764				
Program Service Revenue	2a	Business Code						
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		0				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		374	0	0	374
4		Income from investment of tax-exempt bond proceeds		0	0	0	0	
5		Royalties		0	0	0	0	
6a		Gross Rents	(i) Real	(ii) Personal				
b		Less: rental expenses						
c		Rental income or (loss)	0	0				
d		Net rental income or (loss)						
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
b		Less: cost or other basis and sales expenses						
c	Gain or (loss)	0	0					
d	Net gain or (loss)							
8a	Gross income from fundraising events (not including \$ 0 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							
9a	Gross income from gaming activities. See Part IV, line 19	a						
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances	a						
b	Less: cost of goods sold	b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			0				
12	Total revenue. See instructions.			11,391,138	0	0	374	

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	10,886,232	10,886,232		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	1,131,072		1,131,072	
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a				
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	12,017,304	10,886,232	1,131,072	0
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	203,774	1	35,948
	2	Savings and temporary cash investments	3,782,899	2	3,499,225
	3	Pledges and grants receivable, net	6,656,845	3	5,621,057
	4	Accounts receivable, net	3,073	4	94,361
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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	272	7	0
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		b Less: accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	10,646,863	16	9,250,591	
Liabilities	17	Accounts payable and accrued expenses	7,805	17	0
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial 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 to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	7,784,173	25	7,021,872
	26	Total liabilities. Add lines 17 through 25	7,791,978	26	7,021,872
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	1,933,495	27	1,982,059
	28	Temporarily restricted net assets	921,390	28	246,660
	29	Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	2,854,885	33	2,228,719	
34	Total liabilities and net assets/fund balances	10,646,863	34	9,250,591	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . .
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization UNITED WAYS OF NEW ENGLAND INC	Employer identification number 04 2687831
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 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)**.

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

- a Type I b Type II c Type III—Functionally integrated d Type III—Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
- (ii) A family member of a person described in (i) above? _____
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

	Yes	No
11g(i)		✓
11g(ii)		✓
11g(iii)		✓

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization 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	
Concord Carlisle Community Chest Inc	04-2157042	501(c)(3)	✓		✓		✓		5,415
United Way of Massachusetts Bay Inc	04-2382233	501(c)(3)	✓		✓		✓		7,045,006
Cape Islands United Way	04-2271714	501(c)(3)	✓		✓		✓		158,716
Heritage United Way	02-0225575	501(c)(3)	✓		✓		✓		246,759
Sch A, Stmt 1									
Total									10,036,881

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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33⅓% support test—2009. If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33⅓% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% 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—2009. 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—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a **33 1/3 % support tests—2009.** 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—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

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

Information About the supported organizations

		Amount
Name	United Way of Central Massachusetts Inc	84,534
EIN	04-2104017	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Greater Nashua Inc	179,634
EIN	02-6015642	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Tri-County Inc	428,695
EIN	04-2104231	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Acton-Boxborough Inc	41,124
EIN	04-2740795	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Greater Attleboro Taunton	451,827
EIN	04-2104020	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	North Shore United Way Inc	157,274
EIN	04-2257377	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Greater Fall River Inc	114,964
EIN	04-2104026	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Franklin County	7,186
EIN	04-2212894	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	
Name	United Way of Greater Plymouth County Inc	363,835
EIN	04-2103940	
Type Of Organization	501(c)(3)	

Schedule A, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

Listed In Governing Documents Yes
 Supported Organization Notified Yes
 Organized In US Yes

Name	United Way of Rhode Island Inc	480,937
EIN	05-0276059	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	

Name	United Way of Greater New Bedford Inc	186,441
EIN	04-2104264	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	

Name	United Way of North Central Mass Inc	84,534
EIN	04-2233021	
Type Of Organization	501(c)(3)	
Listed In Governing Documents	Yes	
Supported Organization Notified	Yes	
Organized In US	Yes	

Total:		2,580,985
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization UNITED WAYS OF NEW ENGLAND INC

Employer identification number 04 2687831

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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...?, 6 Did the organization inform all grantees...?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours devoted to monitoring..., 7 Amount of expenses incurred..., 8 Does each conservation easement reported on line 2(d) above satisfy the requirements..., 9 In Part XIV, describe how the organization reports 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.

Table with 2 columns: Revenues, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement..., 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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 Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶%
 - b Permanent endowment ▶%
 - c Term endowment ▶%
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,391,138
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,017,304
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-626,166
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-626,166

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	11,391,138
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments	2a	0
	b Donated services and use of facilities	2b	0
	c Recoveries of prior year grants	2c	0
	d Other (Describe in Part XIV.)	2d	0
	e Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	11,391,138
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
	b Other (Describe in Part XIV.)	4b	0
	c Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	11,391,138

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

1	Total expenses and losses per audited financial statements	1	12,017,304
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities	2a	0
	b Prior year adjustments	2b	0
	c Other losses	2c	0
	d Other (Describe in Part XIV.)	2d	0
	e Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	12,017,304
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
	b Other (Describe in Part XIV.)	4b	0
	c Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	12,017,304

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, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part X - Not applicable

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Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
Name and address	American Cancer Society 'New England Division N/A 30 Speen Street N/A Framingham, MA 01701	8,727	0
EIN	06-0271570		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Berkshire United Way N/A 200 South Street N/A Pittsfield, MA 01202	11,277	0
EIN	04-2104841		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Big Brothers Big Sisters of Southern Maine N/A 195 Lancaster Street N/A Portland, ME 04101	6,825	0
EIN	01-0475146		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Boys and Girls Club of Greater Lowell inc N/A 657 Middlesex Street N/A Lowell, MA 01851	8,455	0
EIN	04-2104396		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Cape and Islands United Way N/A 749 Main Street 2Nd Floor N/A Hyannis, MA 02601-4327	158,716	0
EIN	04-2271714		
IRC code section	501(c)(3)		
Method of valuation	N/A		

Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Central Bradford County United Way N/A PO Box 106 N/A Towanda, PA 18848	14,589	0
EIN	23-2077784		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Community Covenant Church N/A 615 Tremont Street N/A Rehoboth, MA 02769	12,252	0
EIN	23-7253717		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Community Health Charities N/A 30 Laurel St Fl 2 N/A Hartford, CT 06106	5,807	0
EIN	13-6167225		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Community United Way Pioneer Valley N/A 184 Mill Street N/A Springfield, MA 01102	41,686	0
EIN	04-2152680		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Concord Carlisle Comm Chest N/A 111 Old Road To Nine Acre Cnr N/A Concord, MA 01742	5,415	0
EIN	04-2157042		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	Girls Incorporated of New Hampshire N/A 815 Elm Street N/A Manchester, NH 03101	17,354	0
EIN	23-7416090		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Greater Twin Cities United Way N/A 404 South 8th Street N/A Minneapolis, MN 55404	11,393	0
EIN	41-1973442		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Hampshire Community United Way N/A 71 King Street N/A Northampton, MA 01061-0123	7,954	0
EIN	04-2104792		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Heart of America United Way N/A 1080 Washington N/A Kansas City, MO 64105	7,722	0
EIN	44-0545812		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Heritage United Way N/A 228 Maple St 4th Fl N/A Manchester, NH 03103	246,759	0
EIN	02-0225575		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Hospice of the North Shore N/A	25,704	0

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

	75 Sylvan Street No B 102		
	N/A		
	Danvers, MA 01923		
EIN	22-2873792		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Junior Achievement of Eastern MA	8,462	0
	N/A		
	33 Broad Street 7th floor		
	N/A		
	Boston, MA 02109		
EIN	04-2127020		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Lakes Region United Way	21,533	0
	N/A		
	95 Water Street		
	N/A		
	Laconia, NH 03246		
EIN	02-0268233		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Lund Family Center	10,215	0
	N/A		
	76 Glen Road		
	N/A		
	Burlington, VT 05406		
EIN	03-0179434		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Middlesex United Way	20,417	0
	N/A		
	100 Riverview Center Ste 230		
	N/A		
	Middletown, CT 06457		
EIN	06-0665170		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Monadnock United Way	62,207	0
	N/A		
	23 Center Street		
	N/A		
	Keene, NH 03431		

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

EIN 02-0236885
 IRC code section 501(c)(3)
 Method of valuation N/A
 Description of non-cash assistance N/A
 Purpose of grant Community Impact

Name and address North Country United Way 6,658 0
 N/A
 PO Box 311
 N/A
 Littleton, NH 03561
 EIN 02-0348027
 IRC code section 501(c)(3)
 Method of valuation N/A
 Description of non-cash assistance N/A
 Purpose of grant Community Impact

Name and address North Shore United Way 157,274 0
 N/A
 Lockbox 231198 Momentum Place
 N/A
 Chicago, IL 60689
 EIN 04-2257377
 IRC code section 501(c)(3)
 Method of valuation N/A
 Description of non-cash assistance N/A
 Purpose of grant Community Impact

Name and address St Marys Area United Way 15,587 0
 N/A
 44 South St Marys Street
 N/A
 St Marys, PA 15857
 EIN 25-1155475
 IRC code section 501(c)(3)
 Method of valuation N/A
 Description of non-cash assistance N/A
 Purpose of grant Community Impact

Name and address The Nativity School of Worcester 10,089 0
 N/A
 67 Lincoln Street
 N/A
 Worcester, MA 01605
 EIN 03-0385377
 IRC code section 501(c)(3)
 Method of valuation N/A
 Description of non-cash assistance N/A
 Purpose of grant Community Impact

Name and address The Hatian Project Inc 27,390 0
 N/A
 PO Box 6891
 N/A
 Providence, RI 02940-6891
 EIN 22-2700013
 IRC code section 501(c)(3)
 Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address	Tulsa Area United Way N/A PO Box 1859 N/A Tulsa, OK 74101	10,979	0
EIN	73-0580283		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	United Way Acton Boxborough N/A PO Box 2258 N/A Acton, MA 01720-6258	41,124	0
EIN	04-2740795		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	United Way Allegheny County N/A One Smithfield Street N/A Pittsburgh, PA 15230-7035	25,120	0
EIN	25-1043578		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	United Way Androscoggin County N/A 66 Ash Street N/A Lewiston, ME 04243	28,269	0
EIN	01-0211564		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	United Way Asheville and Buncombe Co N/A 50 South French Broad St N/A Asheville, NC 28801	8,534	0
EIN	56-0576157		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

Name and address	United Way of Addison County N/A 2 Court Street N/A Middlebury, VT 05753	5,695	0
EIN	03-0221010		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Aroostook N/A 480 Main St 3 N/A Presque Isle, ME 04769	9,494	0
EIN	23-7147455		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Bergen County N/A 6 Forest Ave Ste 2 N/A Paramus, NJ 07652-5245	19,535	0
EIN	22-6028959		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Broome County N/A PO Box 550 N/A Binghamton, NY 13902	6,211	0
EIN	15-0564074		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Buffalo And Erie Counties N/A 742 Delaware Avenue N/A Buffalo, NY 14209-2295	9,345	0
EIN	16-0743969		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Central & Northeastern CT N/A	92,968	0

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

	PO Box 33754		
	N/A		
	Hartford, CT 06150-3754		
EIN	06-0646653		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Central Indiana	14,419	0
	N/A		
	PO Box 88409		
	N/A		
	Indianapolis, IN 46208-0409		
EIN	35-1007590		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Central Jersey	8,598	0
	N/A		
	32 Ford Avenue		
	N/A		
	Milltown, NJ 08850		
EIN	22-1520408		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Central Maryland	40,989	0
	N/A		
	PO Box 1576		
	N/A		
	Baltimore, MD 21203		
EIN	52-0591543		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Central Massachusetts	342,365	0
	N/A		
	484 Main Street Ste 300		
	N/A		
	Worcester, MA 01608-1880		
EIN	04-2104017		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Chittenden County	26,085	0
	N/A		
	412 Farrell St Ste 200		
	N/A		
	South Burlington, VT 05403-4466		

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

EIN 03-0217229

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Dane County	13,124	0
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N/A

PO Box 7548

N/A

Madison, WI 53707

EIN 39-0817532

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Delaware	8,351	0
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N/A

PO Box 566

N/A

Wilmington, DE 19801

EIN 51-0073399

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Dutchess County	18,151	0
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N/A

75 Market Street

N/A

Poughkeepsie, NY 12601

EIN 14-1344805

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Eastern Fairfield County	28,062	0
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N/A

75 Washington Avenue

N/A

Bridgeport, CT 06604

EIN 06-0864341

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Eastern Maine	39,875	0
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N/A

24 Springer Dr Ste 201

N/A

Bangor, ME 04401-3655

EIN 01-0211478

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Franklin County 7,186 0

N/A
51 Davis St 2
N/A
Greenfield, MA 01301

EIN 04-2212894

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Greater Attleboro Taunton 451,827 0

N/A
247 Maple Street
N/A
Attleboro, MA 02703

EIN 04-2104020

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Greater Fall River 114,964 0

N/A
POBOX 2550
N/A
Fall River, MA 02722

EIN 04-2104026

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Greater Milwaukee 5,748 0

N/A
225 West Vine Street
N/A
Milwaukee, WI 53212

EIN 39-0806190

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Greater Nashua 179,634 0

N/A
20 Broad Street
N/A
Nashua, NH 03064

EIN 02-6015642

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address	United Way of Greater New Bedford N/A 105 William Street 4th Fl N/A New Bedford, MA 02740	186,441	0
EIN	04-2104264		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Greater New Haven N/A 71 Orange Street N/A New Haven, CT 06510	35,169	0
EIN	06-0646761		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Greater Plymouth County N/A 928 West Chestnut St N/A Brockton, MA 02301	363,835	0
EIN	04-2103940		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Greater Portland N/A PO Box 15200 N/A Portland, ME 04112-5200	95,012	0
EIN	01-0241767		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Greater Rochester N/A 75 College Avenue N/A Rochester, NY 14607	94,391	0
EIN	16-1015782		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Greater Waterbury N/A	22,078	0

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

	PO Box 2688		
	N/A		
	Waterbury, CT 06723		
EIN	06-0646636		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Green Mountain	32,285	0
	N/A		
	963 Paine Turnpike North 2		
	N/A		
	Montpelier, VT 05602-9163		
EIN	03-0261384		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Hudson County	5,337	0
	N/A		
	857 Bergen Avenue		
	N/A		
	Jersey City, NJ 07306		
EIN	22-1487218		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Kennebec Valley	12,582	0
	N/A		
	331 Water St Ste 5		
	N/A		
	Augusta, ME 04330		
EIN	01-6004404		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Lake County - IL	5,832	0
	N/A		
	330 S Greenleaf St		
	N/A		
	Gurnee, IL 60031		
EIN	36-2167949		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Lancaster County (PA)	22,285	0
	N/A		
	630 Janet Avenue		
	N/A		
	Lancaster, PA 17601		

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

EIN	23-1352093		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Long Island	59,069	0
	N/A		
	819 Grand Boulevard		
	N/A		
	Deer Park, NY 11729-5703		
EIN	11-6042392		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Manitowac County	9,211	0
	N/A		
	PO Box 2345		
	N/A		
	Manitowoc, WI 54221		
EIN	39-0907399		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Massachusetts Bay Inc	7,045,006	0
	N/A		
	51 Sleeper St		
	N/A		
	Boston, MA 02210		
EIN	04-2382233		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Meriden	11,837	0
	N/A		
	35 Pleasant Street Suite 1E		
	N/A		
	Meriden, CT 06450		
EIN	06-0646714		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Merrimack County	32,280	0
	N/A		
	46 South Main Street		
	N/A		
	Concord, NH 03301		
EIN	02-6006033		
IRC code section	501(c)(3)		
Method of valuation	N/A		

Description of non-
cash assistance N/A

Purpose of grant Community Impact

Name and address	United Way of Metropolitan Chicago	12,100	0
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N/A

560 West Lake Street

N/A

Chicago, IL 60661

EIN 30-0200478

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Mid Coast Maine	23,542	0
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N/A

34 Wing Farm Parkway Ste 201

N/A

Bath, ME 04530

EIN 01-8004866

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Mid-Maine	20,980	0
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N/A

PO Box 91

N/A

Waterville, ME 04903

EIN 01-0233280

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Milford Inc	5,517	0
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N/A

54 Darina Place

N/A

Milford, CT 06460

EIN 06-0724409

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Monmouth County	10,763	0
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N/A

1415 Wyckoff Road Wall Township

N/A

Farmingdale, NJ 07727

EIN 22-1828435

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-

cash assistance

Purpose of grant Community Impact

Name and address	United Way of Morris County N/A PO Box 1948 N/A Morristown, NJ 07962	7,483	0
EIN	22-1487247		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	UW of Naugatuck And Beacon Falls N/A 284 Church Street N/A Naugatuck, CT 06770	7,375	0
EIN	06-0788028		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of National Capital Area N/A 8391 Old Courthouse Rd Ste 200 N/A Vienna, VA 22182	105,315	0
EIN	53-0234290		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of New York City N/A 2 Park Avenue 2nd Fl N/A New York, NY 10016	25,776	0
EIN	13-2617681		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of North Central Massachusetts N/A 285 John Fitch Hwy Ste 1 N/A Fitchburg, MA 01420	84,534	0
EIN	04-2233021		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Northern NH N/A	12,564	0

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

	PO Box 614		
	N/A		
	Berlin, NH 03570		
EIN	02-0303906		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Northern Shenandoah Valley	31,511	0
	N/A		
	PO Box 460		
	N/A		
	Winchester, VA 22604		
EIN	54-0525106		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Northwest CT Inc	14,941	0
	N/A		
	16 Bird St Ste 1		
	N/A		
	Torrington, CT 06790		
EIN	06-6009309		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Norwalk & Wilton Inc	14,875	0
	N/A		
	PO Box 906		
	N/A		
	Norwalk, CT 06852		
EIN	06-1344424		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Ocean County	20,059	0
	N/A		
	650 Washington St Ste 2		
	N/A		
	Toms River, NJ 08753		
EIN	22-2148978		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Passaic County	5,890	0
	N/A		
	22 Mill Street Rd 3rd fl		
	N/A		
	Paterson, NJ 07501		

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

EIN	22-6070498		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Rhode Island	480,937	0
	N/A		
	229 Waterman Street		
	N/A		
	Providence, RI 02906-5212		
EIN	05-0276059		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Roanoke Valley	5,694	0
	N/A		
	325 Campbell Avenue SW		
	N/A		
	Roanoke, VA 24016		
EIN	54-0535302		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Rock River Valley	23,561	0
	N/A		
	612 N Main St Ste 300		
	N/A		
	Rockford, IL 61103		
EIN	36-2167843		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Rutland County Inc	12,171	0
	N/A		
	6 Church St Ste 1		
	N/A		
	Rutland, VT 05701		
EIN	03-6000224		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of San Diego County	5,173	0
	N/A		
	4699 Murphy Canyon Road		
	N/A		
	San Diego, CA 92123		
EIN	95-2213995		
IRC code section	501(c)(3)		
Method of valuation	N/A		

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Somerset County 14,608 0

N/A
PO Box 6835
N/A
Bridgewater, NJ 08807

EIN 22-1627729

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Southbridge Sturbridge and Charlton 6,586 0

N/A
50 Elm Street FL 2
N/A
Southbridge, MA 01550

EIN 04-2308155

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Southeastern Connecticut 25,967 0

N/A
PO Box 375
N/A
Gales Ferry, CT 06335

EIN 06-0771393

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of Southeastern Pennsylvania 18,580 0

N/A
7 Benjamin Franklin Parkway U
N/A
Philadelphia, PA 19103

EIN 23-1556045

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address United Way of The Bay Area 7,365 0

N/A
221 Main St Ste 300
N/A
San Francisco, CA 94105

EIN 94-1312348

IRC code section 501(c)(3)

Method of valuation N/A

Description of non-cash assistance N/A

Purpose of grant Community Impact

Name and address	United Way of the Bluegrass N/A 2480 Fortune Drive 250 N/A Lexington, KY 40509	60,037	0
EIN	61-0444679		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of the Greater Lehigh Valley N/A 2200 Avenue A 3rd Fl N/A Bethlehem, PA 18017	13,315	0
EIN	23-2657933		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of the Lower Eastern Shore N/A 801 N Salisbury Blvd Ste 202 N/A Salisbury, MD 21801-3633	6,206	0
EIN	52-6016589		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of the National Capital Area N/A 8391 Old Courthouse Road Ste 200 N/A Vienna, VA 22182-3819	19,165	0
EIN	53-0234290		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of the Upper Valley N/A 10 Bank Street N/A Lebanon, NH 03766	20,801	0
EIN	02-0306103		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of the Texas Gulf Coast N/A	17,006	0

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

	50 Waugh Drive		
	N/A		
	Houston, TX 77007		
EIN	74-1167964		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Tri-County	428,695	0
	N/A		
	46 Park Street		
	N/A		
	Framingham, MA 01702		
EIN	04-2104231		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Union County	13,976	0
	N/A		
	33 West Grand Street		
	N/A		
	Elizabeth, NJ 07202		
EIN	22-1904427		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Untied Way of Warren County	7,445	0
	N/A		
	PO Box 844		
	N/A		
	Warren, PA 16365		
EIN	25-6003367		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Webster And Dudley	5,908	0
	N/A		
	275 Main Street		
	N/A		
	Webster, MA 01570		
EIN	04-2380352		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of West Central Connecticut	6,688	0
	N/A		
	200 Main Street		
	N/A		
	Bristol, CT 06010		

Schedule I, Part IV, Statement 1

UNITED WAYS OF NEW ENGLAND INC

EIN	06-0653262		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Westchester and Putnam Inc	22,569	0
	N/A		
	PO Box 520		
	N/A		
	Hartsdale, NY 10530		
EIN	13-1997636		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of Western Connecticut	15,712	0
	N/A		
	62 Palmers Hill Road		
	N/A		
	Stamford, CT 06902		
EIN	06-0646577		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way of York County	79,848	0
	N/A		
	Po Box 727		
	N/A		
	Kennebunk, ME 04043		
EIN	01-0276862		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way Services Inc	5,442	0
	N/A		
	215 W 6th Street		
	N/A		
	Dubuque, IA 52001		
EIN	42-0761060		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	United Way Windham Countybrooks House	7,488	0
	N/A		
	28 Vernon St Ste 410		
	N/A		
	Brattleboro, VT 05301		
EIN	03-6003074		
IRC code section	501(c)(3)		
Method of valuation	N/A		

Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Valley United Way N/A 3 Corporate Dr Ste 501 N/A Shelton, CT 06484	17,251	0
EIN	06-0847098		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	Wellsboro Area United Fund N/A PO Box 121 N/A Wellsboro, PA 16901	13,951	0
EIN	25-1351868		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		
Name and address	YouthBuild Boston N/A 504 Dudley Street N/A Roxbury, MA 02119	45,779	0
EIN	04-3080098		
IRC code section	501(c)(3)		
Method of valuation	N/A		
Description of non-cash assistance	N/A		
Purpose of grant	Community Impact		

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

Name of the organization: **UNITED WAYS OF NEW ENGLAND INC**
Employer identification number: **04 : 2687831**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous	✓	6	110,091	FMV
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 ▶ (.....)				
26 Other ▶ (.....)				
27 Other ▶ (.....)				
28 Other ▶ (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **1**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		✓
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.		

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

UNITED WAYS OF NEW ENGLAND INC

Employer identification number

04 2687831

Form 990, Part VI, Section B, Line 11 - As part of the performance agreement between United Ways of New England, Inc. and United Way of Massachusetts Bay, Inc. (UWMB), a related organization, UWMB's Administration and Finance Committee reviews the annual Form 990 and recommends approval to UWMB's Board of Directors.

Form 990, Part VI, Section B, Line 12c - United Ways of New England, Inc.'s (UWONE) Code of Ethics is intended to guide and advance the ethical conduct of both volunteers and staff in carrying out their UWONE responsibilities. As part of the Code of Ethics, all volunteers and staff must avoid any conflict of interest, or the appearance of a conflict of interest, which could tarnish the reputation of UWONE or undermine the public's trust in UWONE staff and volunteers. To ensure that the best interests of UWONE are served all volunteers and staff upon first being elected, appointed, hired or assigned, discloses in writing, to the best of his or her knowledge, any potential business or agency conflicts of interest that involve the individual, his or her immediate relatives, or any entity with which he or she is associated in a significant leadership or ownership capacity. Thereafter, these disclosures are updated annually, or sooner if changed circumstances in a particular case may warrant. Through a performance agreement, the terms of all potential conflicts of interest are reviewed by United Way of Massachusetts Bay, Inc's (UWMB) management and reported to UWMB's audit committee on an annual basis. The committee develops recommendations as to whether, all factors considered, a given transaction is on fair and reasonable terms and is in the best interest of UWONE and provides these recommendations to UWONE's Board of Directors for approval.

Form 990, Part VI, Section B, Line 15 - The CPO of UWONE is an employee of and paid by a related organization, United Way of Massachusetts Bay, Inc. (UWMB). The UWMB Board reviews and approves all executive compensation, as recommended by UWMB's Compensation Committee.

Form 990, Part VI, Section C, Line 19 - UWONE provides the most recently available Form 990 on their website. In addition, upon request, UWONE will provide any governing documents, conflict of interest policy, and audited financial statements. UWONE's audited financial statements are available for public inspection at the Massachusetts Attorney General's office.

Schedule R, Part V, Line 1k - Participating Partner United Way Distributions

Schedule R, Part V, Line 1l - Effective July 1, 2008, The United Ways of New England Inc. (UWONE) entered into a performance agreement ("agreement") with the United Ways of Massachusetts Bay, Inc. (UWMB) whereby UWMB conducts the annual UWONE fund-raising campaigns and pays expenses for all necessary and appropriate UWONE functions. The agreement specified that UWMB receive an annual fee equal to approximately 7.5% of the internally audited gross campaign revenue of the prior year UWONE campaign for Participating United Ways and their affiliated organizations and 8.7% for Non- Participating United Ways and their affiliated organizations. The term of the agreement is through June 30, 2012, as such, UWONE relies on UWMB for its operations and management.

Schedule R, Part V, Line 1m - UWMB provides these resources to UWONE which are recoverable by UWMB as part of the performance agreement.

Activity Or Mission Description

Description

school ready to learn and achive, that youth stay engaged in school and graduate from high school with options for the future and that individuals and familes can achieve financial stablility through job training and housing.

Description of Identification of Related Tax-Exempt Organizations

Name and EIN	United Way of Tri-County N/A (04-2104231)
Address	46 Park Street N/A Framingham, MA 01702
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	United Way Acton-Boxborough N/A (04-2740795)
Address	PO Box 2258 N/A Acton, MA 01720-6258
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	United Way of Greater Attleboro Taunton N/A (04-2104020)
Address	247 Maple Street N/A Attleboro, MA 02703
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	United Way of Greater Fall River N/A (04-2104026)
Address	POBOX 2550 N/A Fall River, MA 02722
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	North Shore United Way N/A (04-2257377)
Address	Lockbox 231198 Momentum Place N/A Chicago, IL 60689
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	United Way of Franklin County N/A (04-2212894)
Address	51 Davis St 2 N/A Greenfield, MA 01301
Primary activities	Community Impact
State or foreign country	MA
Exempt code section	501(c)(3)
Public charity status	Line 7
Direct controlling entity	N/A
Name and EIN	United Way of Greater Plymouth County N/A (04-2103940)
Address	928 West Chestnut St N/A Brockton, MA 02301
Primary activities	Community Impact
State or foreign country	MA

Schedule O, Statement 2

UNITED WAYS OF NEW ENGLAND INC

Exempt code section 501(c)(3)
 Public charity status Line 7
 Direct controlling entity N/A

Name and EIN United Way of Rhode Island N/A (05-0276059)
 Address 229 Waterman Street N/A
 Providence, RI 02906-5212

Primary activities Community Impact
 State or foreign country MA
 Exempt code section 501(c)(3)
 Public charity status Line 7
 Direct controlling entity N/A

Name and EIN United Way of Greater New Bedford N/A (04-2104264)
 Address 105 William Street 4th Fl N/A
 New Bedford, MA 02740

Primary activities Community Impact
 State or foreign country MA
 Exempt code section 501(c)(3)
 Public charity status Line 7
 Direct controlling entity N/A

Name and EIN United Way of North Central Massachusetts N/A (04-2233021)
 Address 285 John Fitch Hwy Ste 1 N/A
 Fitchburg, MA 01420

Primary activities Community Impact
 State or foreign country MA
 Exempt code section 501(c)(3)
 Public charity status Line 7
 Direct controlling entity N/A

Description of Covered Relationships and Transaction Thresholds

		Amount involved
Name	Cape and Islands United Way	158,716
	N/A	
Transaction type	k	
Name	Heritage United Way	246,759
	N/A	
Transaction type	k	
Name	United Way of Central Massachusetts	342,365
	N/A	
Transaction type	k	
Name	United Way of Greater Nashua	179,634
	N/A	
Transaction type	k	
Name	United Way of Tri-County	428,695
	N/A	
Transaction type	k	
Name	United Way Acton-Boxborough	41,124
	N/A	
Transaction type	k	
Name	United Way of Greater Attleboro Taunton	451,827
	N/A	
Transaction type	k	
Name	United Way of Greater Fall River	114,964
	N/A	
Transaction type	k	
Name	North Shore United Way	157,274
	N/A	
Transaction type	k	
Name	United Way of Franklin County	7,186
	N/A	
Transaction type	k	
Name	United Way of Greater Plymouth County	363,835
	N/A	
Transaction type	k	
Name	United Way of Rhode Island	480,937
	N/A	
Transaction type	k	
Name	United Way of Greater New Bedford	186,441
	N/A	
Transaction type	k	
Name	United Way of North Central Massachusetts	84,534
	N/A	
Transaction type	k	

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

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

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

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

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

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)	United Way of Massachusetts Bay Inc, N/A	i	1,131,072
(2)	United Way of Massachusetts Bay Inc, N/A	m	338,601
(3)	United Way of Massachusetts Bay Inc, N/A	n	428,392
(4)	Concord Carlisle Comm Chest, N/A	k	5,415
(5)	United Way of Massachusetts Bay Inc, N/A	k	7,045,006
(6)	(Continued on Schedule O, Statement 3)		

