

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2010 calendar year, or tax year beginning _____, **and ending** _____

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

C Name of organization
 United Way of Midland County
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
 220 W. Main Street 100
 City or town, state or country, and ZIP + 4
 Midland MI 48640

D Employer identification number
 38-1434224

E Telephone number
 989-631-3670

F Name and address of principal officer:
 Ann Fillmore
 220 West Main Street, Suite 100
 Midland MI 48640

G Gross receipts\$ 6,002,568

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

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

J Website: ▶ www.unitedwaymidland.org **H(c) Group exemption number** ▶ _____

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: 1932 **M State of legal domicile:** MI

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To improve lives by mobilizing the caring power of the Midland community through leadership, collaboration, volunteerism and charitable fundraising.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	25	
	4	25	
	5	16	
	6	2133	
	7a	10,396	
Revenue	8 Contributions and grants (Part VIII, line 1h)	5,489,851	5,607,930
	9 Program service revenue (Part VIII, line 2g)	115,832	113,908
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	65,914	53,123
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	110,490	138,019
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,782,087	5,912,980
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,626,902
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		613,513	648,207
16a Professional fundraising fees (Part IX, column (A), line 11e)			
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 381,638			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		623,612	659,216
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,864,027	5,750,945	
19 Revenue less expenses. Subtract line 18 from line 12	-81,940	162,035	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	10,639,242	11,298,829
	21 Total liabilities (Part X, line 26)	571,448	683,578
	22 Net assets or fund balances. Subtract line 21 from line 20	10,067,794	10,615,251

Part II Signature Block

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

Sign Here

Signature of officer: Ann Fillmore Date: _____
 Type or print name and title: Executive Director

Paid Preparer Use Only

Print/Type preparer's name: Michael R. Zimmerman Preparer's signature: _____ Date: 05/11/11 Check if self-employed PTIN: P00039187

Firm's name ▶ Yeo & Yeo, P.C. Firm's EIN ▶ 38-2706146
 Firm's address ▶ 6018 Eastman Ave. Midland, MI 48640-2518 Phone no. 989-631-6060

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:
To improve lives by mobilizing the caring power of the Midland community through leadership, collaboration, volunteerism and charitable fundraising.

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 \$ 254,575 including grants of\$) (Revenue \$)
Research and Community Impact - disbursement to and administration of funds to United Way agencies to further their various exempt purposes. Also community planning and problem solving.

4b (Code:) (Expenses \$ 275,356 including grants of\$) (Revenue \$)
Facility Operations - operation of shared facility.

4c (Code:) (Expenses \$ 192,326 including grants of\$) (Revenue \$)
Volunteer Connections - meets community needs with volunteers - through recruitment and matching of volunteers with opportunities, promoting and rewarding volunteerisms, and training and consultation with area non-profits, schools, churches, service clubs and businesses.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 4,492,013 including grants of\$ 4,443,522) (Revenue \$)

4e Total program service expenses ▶ 5,214,270

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)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
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? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	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? If "Yes," complete Schedule D, Part VII		X
c	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? If "Yes," complete Schedule D, Part VIII		X
d	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? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
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? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	
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? If "Yes," complete Schedule I, Parts I and III	<input checked="" type="checkbox"/>	
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? If "Yes," complete Schedule J		<input checked="" type="checkbox"/>
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule L, Part II		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule L, Part III		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<input checked="" type="checkbox"/>	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule R, Part I		<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		<input checked="" type="checkbox"/>
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<input checked="" type="checkbox"/>
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? If "Yes," complete Schedule R, Part VI		<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1a	4		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	16		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
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?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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?		X
10b	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?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	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	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	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?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **MI**
- 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: **Ann Fillmore** **220 W. Main Street, Suite 100**
Midland **MI 48640** **989-631-3670**

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

Check if Schedule O contains a response to any question in this Part VII

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.

- 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, if any. 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 neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(1) BRIDGETTE GRANS DEN TRUSTEE	1.00	X					0	0	0	
(2) CLARK VOLZ PRESIDENT	1.00	X					0	0	0	
(3) WILLIAM BATEMAN TRUSTEE	1.00	X					0	0	0	
(4) LYNN BRUCHOF TRUSTEE	1.00	X					0	0	0	
(5) DARRELL ZAVITZ VICE PRESIDENT	1.00	X					0	0	0	
(6) ERICK FORSHEE TRUSTEE	1.00	X					0	0	0	
(7) DOUG WARD TREASURER	1.00	X					0	0	0	
(8) JAMES WRIGHT TRUSTEE	1.00	X					0	0	0	
(9) BOB HANSEN TRUSTEE	1.00	X					0	0	0	
(10) Dr. ROBERT KLOMPARENS TRUSTEE	1.00	X					0	0	0	
(11) JOHN KESSLER TRUSTEE	1.00	X					0	0	0	
(12) SCOTT SZALONY TRUSTEE	1.00	X					0	0	0	
(13) JACK TELFER TRUSTEE	1.00	X					0	0	0	
(14) MARC MCCANN TRUSTEE	1.00	X					0	0	0	
(15) PATTI KEPLER TRUSTEE	1.00	X					0	0	0	
(16) SCOTT SZALONY TRUSTEE	1.00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(17) TIM LEMKE TRUSTEE	1.00	X						0	0	0
(18) TAD EASTMAN TRUSTEE	1.00	X						0	0	0
(19) HEDY LUKE TRUSTEE	1.00	X						0	0	0
(20) SID ALLEN TRUSTEE	1.00	X						0	0	0
(21) Dr. KATHY ELLISON TRUSTEE	1.00	X						0	0	0
(22) SCOTT LAWSON TRUSTEE	1.00	X						0	0	0
(23) SELINA TISDALE TRUSTEE	1.00	X						0	0	0
(24) WALLY MAYTON Trustee	1.00	X						0	0	0
(25) NANCY VALLENTINE TRUSTEE	1.00	X						0	0	0
(26) ANN FILMORE EXECUTIVE DIRECTOR	40.00			X				93,327	0	0
(27)										
(28)										
1b Sub-total								93,327		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								93,327		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **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				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,607,930			
	g Noncash contributions included in lines 1a-1f: \$		152,639			
	h Total. Add lines 1a-1f		5,607,930			
Program Service Revenue	2a Rents from affiliates	Busn. Code	113,908			113,908
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		113,908			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		55,337			55,337
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real				
		(ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	87,374			
		(ii) Other				
	b Less: cost or other basis & sales exps.		89,588			
	c Gain or (loss)		-2,214			
	d Net gain or (loss)		-2,214	-2,214		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
c Net income or (loss) from fundraising events						
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	Busn. Code					
11a Pledge processing revenue		65,654			65,654	
b BRFS survey		35,000	35,000			
c Misc. income		18,601	18,601			
d All other revenue		18,764	8,368	10,396		
e Total. Add lines 11a-11d		138,019				
12 Total revenue. See instructions.		5,912,980	59,755	10,396	234,899	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,834,516	3,834,516		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	609,006	609,006		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	93,327	33,598	27,998	31,731
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	444,650	252,444	67,011	125,195
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	39,216	29,413	3,515	6,288
9 Other employee benefits	31,221	13,245	7,035	10,941
10 Payroll taxes	39,793	20,882	7,099	11,812
11 Fees for services (non-employees):				
a Management				
b Legal	1,172		1,172	
c Accounting	14,020		14,020	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees	6,484		6,484	
g Other				
12 Advertising and promotion	9,248	4,932		4,316
13 Office expenses	137,630	48,114	6,949	82,567
14 Information technology	6,160	2,895	1,478	1,787
15 Royalties				
16 Occupancy	105,876	105,876		
17 Travel	3,014	2,007	238	769
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	8,385	5,295	824	2,266
20 Interest				
21 Payments to affiliates	48,491	48,491		
22 Depreciation, depletion, and amortization	132,156	132,156		
23 Insurance	9,935	3,359	6,576	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a Events	63,467	8,096	125	55,246
b Contractual fees	39,908			39,908
c MI Association of UW dues	24,246	24,246		
d Telephone survey	17,318	17,318		
e Miscellaneous	13,438	5,276	2,726	5,436
f All other expenses	18,268	13,105	1,787	3,376
25 Total functional expenses. Add lines 1 through 24f	5,750,945	5,214,270	155,037	381,638
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)		
		Beginning of year		End of year		
Assets	1	Cash—non-interest bearing		1		
	2	Savings and temporary cash investments	2,041,408	2	2,238,071	
	3	Pledges and grants receivable, net	4,317,877	3	4,413,733	
	4	Accounts receivable, net	23,116	4	14,743	
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	1,487	9	9,964	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	4,329,203		
	b	Less: accumulated depreciation	10b	2,495,489	10c	1,833,714
	11	Investments—publicly traded securities	2,366,539	11	2,788,604	
	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)	10,639,242	16	11,298,829		
Liabilities	17	Accounts payable and accrued expenses	568,758	17	680,109	
	18	Grants payable		18		
	19	Deferred revenue	2,690	19	3,469	
	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		25		
	26	Total liabilities. Add lines 17 through 25	571,448	26	683,578	
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	3,599,530	27	3,879,163	
	28	Temporarily restricted net assets	5,786,353	28	6,034,177	
	29	Permanently restricted net assets	681,911	29	701,911	
	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	10,067,794	33	10,615,251	
34	Total liabilities and net assets/fund balances	10,639,242	34	11,298,829		

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,912,980
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,750,945
3	Revenue less expenses. Subtract line 2 from line 1	3	162,035
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,067,794
5	Other changes in net assets or fund balances (explain in Schedule O)	5	385,422
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	10,615,251

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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.	X	
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 separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?		X
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.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

United Way of Midland County

Employer identification number

38-1434224

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	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,207,938	5,341,497	5,537,850	5,489,851	5,607,930	27,185,066
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	5,207,938	5,341,497	5,537,850	5,489,851	5,607,930	27,185,066
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)						8,388,491
6 Public support. Subtract line 5 from line 4						18,796,575

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	5,207,938	5,341,497	5,537,850	5,489,851	5,607,930	27,185,066
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	131,848	152,054	124,789	65,914	55,337	529,942
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.)	108,263	93,552	98,069	226,322	240,325	766,531
11 Total support. Add lines 7 through 10						28,481,539

12 Gross receipts from related activities, etc. (see instructions) 12 61,969

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	66.00%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	79.52%

16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2010. 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—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Part II, Line 10 - Other Income Detail

Miscellaneous income \$ 766,531

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

2010

Open to Public Inspection

Name of the organization

United Way of Midland County

Employer identification number

38-1434224

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 2 columns: Question, Held at the End of the Tax Year. Includes questions 1-8 regarding 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: Question, Amount. Includes questions 1a, 1b, and 2 regarding collections of art and historical treasures.

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 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	2,366,539	1,687,299	2,971,166		
b Contributions	20,000	7,574	10,000		
c Net investment earnings, gains, and losses	416,819	694,466	-1,268,867		
d Grants or scholarships					
e Other expenditures for facilities and programs	-14,826	-22,800	-25,000		
f Administrative expenses					
g End of year balance	2,788,604	2,366,539	1,687,299		

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

- a** Board designated or quasi-endowment **▶ 100.00 %**
- b** Permanent endowment **▶** %
- c** Term endowment **▶** %

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

	Yes	No
(i) unrelated organizations		X
(ii) related organizations		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

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

Part VI 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		324,500		324,500
b Buildings		2,866,378	1,665,206	1,201,172
c Leasehold improvements				
d Equipment		447,961	420,438	27,523
e Other		690,364	409,845	280,519
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,833,714

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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	5,912,980
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,750,945
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	162,035
4	Net unrealized gains (losses) on investments	4	373,085
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	12,337
9	Total adjustments (net). Add lines 4 through 8	9	385,422
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	547,457

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	5,984,020
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	373,085
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	285,936
e	Add lines 2a through 2d	2e	659,021
3	Subtract line 2e from line 1	3	5,324,999
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	587,981
c	Add lines 4a and 4b	4c	587,981
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,912,980

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

1	Total expenses and losses per audited financial statements	1	5,436,563
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	273,599
e	Add lines 2a through 2d	2e	273,599
3	Subtract line 2e from line 1	3	5,162,964
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	587,981
c	Add lines 4a and 4b	4c	587,981
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,750,945

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.

Part XI, Line 8 - Reconciliation of Changes - Other

Sharing Tree gifts-in-kind	\$	273,599
Change in value of split-interest agreement	\$	6,356
Discount to present value	\$	5,981
Designated pledges	\$	-587,981
Sharing Tree gifts-in-kind	\$	-273,599
Designated pledges	\$	587,981

Part XIV Supplemental Information (continued)

Part XII, Line 2d - Revenue Amounts Included in Financials - Other

Sharing Tree gifts-in-kind	\$ 273,599
Change in value of split-interest agreement	\$ 6,356
Discount to present value	\$ 5,981

Part XII, Line 4b - Revenue Amounts Included on Return - Other

Designated pledges	\$ 587,981
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Part XIII, Line 2d - Expense Amounts Included in Financials - Other

Sharing Tree gifts-in-kind	\$ 273,599
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Part XIII, Line 4b - Expense Amounts Included on Return - Other

Designated pledges	\$ 587,981
--------------------	------------

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

United Way of Midland County

Employer identification number

38-1434224

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	AMERICAN RED CROSS-MDL CHAPTER	38-1565340		248,000				Agency allocation
(2)	ARNOLD CENTER	38-6116234		71,000				Agency allocation
(3)	THE ARC OF MIDLAND	38-1877764		165,000				Agency allocation
(4)	BIG BROTHERS BIG SISTERS IN THE HEA	38-1553323		298,000				Agency allocation
(5)	BOY SCOUTS- LAKE HURON AREA COUNCIL	38-1972383		85,000				Agency allocation
(6)	CAMP FIRE USA MIDLAND CNTY COUNCIL	38-1357991		118,000				Agency allocation
(7)	CATHOLIC FAMILY SERVICE- MIDLAND	38-1795701		42,700				Agency allocation
(8)	RAILWAY FAMILY CENTER	38-1534400		89,000				Agency allocation
(9)	SHELTERHOUSE	38-2283832		145,000				Agency allocation

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

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization United Way of Midland County Employer identification number 38-1434224

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. **Part II** can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	FAMILY & CHILDREN'S SERVICE-MIDLAND	38-1398840		385,000				Agency allocation
(2)	GIRL SCOUTS- HEART OF MICHIGAN	38-1684222		24,920				Agency allocation
(3)	HIDDEN HARVEST	38-3350163		27,306				Agency allocation
(4)	LITERACY COUNCIL OF MIDLAND	38-2672475		38,000				Agency allocation
(5)	MIDLAND AREA HOMES	38-1913233		107,500				Agency allocation
(6)	MIDLAND CAMPING COUNCIL	38-1422404		110,000				Agency allocation
(7)	CANCER SERVICES	38-6073785		152,350				Agency allocation
(8)	MIDLAND COMMUNITY CENTER	38-1534400		550,000				Agency allocation
(9)	NORTH MIDLAND FAMILY CENTER	38-1534400		138,000				Agency allocation

- 2 Enter total number of section 501(c)(3) and government organizations ▶ _____
- 3 Enter total number of other organizations ▶ _____

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

United Way of Midland County

Employer identification number

38-1434224

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	SALVATION ARMY	38-1370971		220,000				Agency allocation
(2)	TEN-SIXTEEN RECOVERY NETWORK	38-2278390		125,000				Agency allocation
(3)	WEST MIDLAND FAMILY CENTER	38-2416339		340,000				Agency allocation
(4)	SENIOR SERVICES	38-6107383		85,000				Agency allocation
(5)	SUCCESS BY 6	38-1739040		44,000				Child development
(6)	MITCON	38-1787406		75,093				Technology
(7)	DISABILITY NETWORK OF MICHIGAN	38-2912348		33,332				Agency allocation
(8)	WHEELER ROAD CHURCH OF CHRIST	38-6036428		20,000				Food pantry
(9)	UNITED WAY 211	20-8782528		95,000				Agency allocation

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

**Open To Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

United Way of Midland County

Employer identification number
38-1434224

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	X	69	89,588	FMV on date of donation
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶(bldg improv)	X	1	63,051	FV on date of donation
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

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

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

Schedule M (Form 990) (2010)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

United Way of Midland County

Employer identification number

38-1434224

Form 990, Part III, Line 4d - All Other Achievements

Allocations and payments to affiliates.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Provided to the board members for their review during regular board meeting.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Board members sign a conflict of interest disclosure statement annually.

Monitoring is done at committee levels and members are asked to abstain from any activity where a known conflict of interest exists. Staff members sign a conflict of interest acknowledgment when hired. The policy is enforced by board members.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Compensation is based in part on the current director's situation as it relates to recruitment and retention, historical data from the previous ED, as well as an informal survey of UW ED's in similar demographics.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The Board proposes employee salaries and hourly rates based on roles and responsibilities. The Executive Director makes a proposal for approval of any increases.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Name of the organization United Way of Midland County	Employer identification number 38-1434224
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Governing documents are available to the public upon request and on their website.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2010

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2010 or other tax year beginning , and
ending ▶ See separate instructions.

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section</p> <p><input checked="" type="checkbox"/> 501(C)(3) <input type="checkbox"/> 220(e) <input type="checkbox"/> 530(a)</p> <p><input type="checkbox"/> 408(e) <input type="checkbox"/> 408A <input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year 11,298,829</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) United Way of Midland County</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 100 220 W. Main Street</p> <p>City or town, state, and ZIP code Midland MI 48640</p> <p>F Group exemption number (See instructions.) ▶</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>	<p>D Employer identification number (Employees' trust, see instructions.) 38-1434224</p> <p>E Unrelated business activity codes (See instructions.) 561499 811000</p>
--	--	--	---

H Describe the organization's primary unrelated business activity.
▶ **Parking lot maintenance for building.**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation.
▶

J The books are in care of ▶ **Ann Fillmore** Telephone number ▶ **989-631-3670**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance	1c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions; attach schedule.) See Stmt 1	12	10,396	10,396
13	Total. Combine lines 3 through 12	13	10,396	10,396

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	4,689
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules.)	20	
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
22b		22b	0
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) See Statement 2	28	5,268
29	Total deductions. Add lines 14 through 28	29	9,957
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	439
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	439
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33	1,000
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:	
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____	
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____	
c Income tax on the amount on line 34	35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36
37 Proxy tax. See instructions	37
38 Alternative minimum tax	38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40a	
b Other credits (see instructions)	40b	
c General business credit. Attach Form 3800	40c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d	
e Total credits. Add lines 40a through 40d	40e	
41 Subtract line 40e from line 39	41	
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other	42	
43 Total tax. Add lines 41 and 42	43	0
44a Payments: A 2009 overpayment credited to 2010	44a	
b 2010 estimated tax payments	44b	
c Tax deposited with Form 8868	44c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	44d	
e Backup withholding (see instructions)	44e	
f Credit for small employer health insurance premiums (Attach Form 8941)	44f	
g Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total ▶	44g	
45 Total payments. Add lines 44a through 44g	45	
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached	46	
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47	
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48	
49 Enter the amount of line 48 you want: Credited to 2011 estimated tax ▶ Refunded ▶	49	

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2010 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional sec. 263A costs (attach sch.)	4a				
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here ▶ _____ ▶
Signature of officer Date Title

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

Paid Preparer Use Only

Print/Type preparer's name Michael R. Zimmerman	Date 05/11/11	Check <input type="checkbox"/> if self-employed	PTIN P00039187
Preparer's signature _____			
Firm's name ▶ Yeo & Yeo, P.C.	Firm's EIN ▶ 38-2706146		
Firm's address ▶ 6018 Eastman Ave. Midland, MI 48640-2518	Phone no 989-631-6060		

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1) <u>N/A</u>
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
---	---	---

(1)		
(2)		
(3)		
(4)		

Total	Total	(b) Total deductions.
-------	-------	-----------------------

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶
 Enter here and on page 1, Part I, line 6, column (B) ▶

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)

(1) <u>N/A</u>			
(2)			
(3)			
(4)			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
---	---	---------------------------------	--	---

(1)		%		
(2)		%		
(3)		%		
(4)		%		

Totals ▶
 Enter here and on page 1, Part I, line 7, column (A). ▶
 Enter here and on page 1, Part I, line 7, column (B). ▶

Total dividends-received deductions included in column 8 ▶

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross inc.	6. Deductions directly connected with income in column 5

(1) <u>N/A</u>				
(2)				
(3)				
(4)				

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
-------------------	---	-------------------------------------	--	--

Totals ▶
 Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). ▶
 Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). ▶

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
Totals	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1) N/A						
(2)						
(3)						
(4)						
(5) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)						

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	

Total. Enter here and on page 1, Part II, line 14

Federal Statements**Statement 1 - Form 990-T, Part I, Line 12 - Other Income**

<u>Description</u>	<u>Amount</u>
Copy machine revenue	\$ 5,921
Maintenance service	4,475
Total	<u>\$ 10,396</u>

Statement 2 - Form 990-T, Part II, Line 28 - Other Deductions

<u>Description</u>	<u>Amount</u>
Supplies	\$ 1,875
Misc. building expenses	893
Custodial services	2,500
Total	<u>\$ 5,268</u>

38-1434224

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
1	LAND	1/01/38	6,500				6,500	0	-- Land	0	0
2	KITCHEN RESTORATION	7/01/92	14,000				14,000	40	MO S/L	6,125	350
3	SHOWER FACILITIES	4/01/93	14,000				14,000	40	MO S/L	5,863	350
8	LAND	1/01/87	235,000				235,000	0	-- Land	0	0
9	BUILDING	1/01/87	365,000				365,000	30	MO S/L	256,514	12,167
10	IMPROVEMENTS	1/01/88	79,879				79,879	30	MO S/L	55,916	2,662
11	CONSTRUCTION IN PROGRESS @ 12/3	1/01/90	1,612,175				1,612,175	40	MO S/L	806,087	40,305
12	MISC. COSTS INCURRED DURING 1990	1/01/90	289,874				289,874	40	MO S/L	144,937	7,247
14	MAILBOXES - LOBBY	2/01/90	1,380				1,380	10	MO S/L	1,380	0
15	BLINDS - UNITED WAY, ARC, CFS	2/01/90	1,413				1,413	10	MO S/L	1,413	0
16	EXTERIOR SIGN	4/01/90	2,920				2,920	20	MO S/L	2,872	48
17	STROSACKER PLAQUE	5/01/90	3,082				3,082	20	MO S/L	3,031	51
18	IBM ELECTRIC MEMORY TYPEWRITE	1/01/86	882				882	10	MO S/L	882	0
19	STEEL CHAIR	6/30/86	280				280	10	MO S/L	280	0
20	Refer 99 LAN System	1/14/00	3,000				3,000	5	MO S/L	3,000	0
21	Browser Tool	1/14/00	1,080				1,080	5	MO S/L	1,080	0
22	MEMORY EXPANSION LASERJET PRINT	1/01/88	975				975	5	MO S/L	975	0
23	COMPUTER SOFTWARE (CAMPAIGN)	6/01/90	5,995				5,995	5	MO S/L	5,995	0
24	FURNITURE - ALLIED OFFICE	5/01/91	1,335				1,335	10	MO S/L	1,335	0
25	COMPUTER (EX. DIRECTORS' OFFICE)	1/01/92	2,974				2,974	5	MO S/L	2,974	0
26	ENTEX COMPUTER MEMORY	12/01/93	202				202	5	MO S/L	202	0
27	TELEVISION	9/01/93	500				500	7	MO S/L	500	0
28	FILE SERVER	2/01/95	4,415				4,415	5	MO S/L	4,415	0
29	COPIER	11/01/95	11,890				11,890	7	MO S/L	11,890	0
30	REFRIGERATOR	10/01/95	499				499	7	MO S/L	499	0
31	ACER COMPUTER	4/01/96	4,173				4,173	5	MO S/L	4,173	0
32	ACER COMPUTER	4/01/96	2,649				2,649	5	MO S/L	2,649	0
33	Sonicwall DMZ (Hardware)	1/31/00	1,795				1,795	5	MO S/L	1,795	0
34	HP Netserver LC3	1/31/00	9,328				9,328	5	MO S/L	9,328	0
35	3 COM SSII Dual Speed Hub	3/15/00	450				450	5	MO S/L	450	0
36	Virus Scan Software	6/15/00	1,056				1,056	5	MO S/L	1,056	0
37	Tradewinds Training Exps	6/30/00	2,181				2,181	5	MO S/L	2,181	0
38	Nobius Intel PIII CPU	7/14/00	1,724				1,724	5	MO S/L	1,724	0
39	Phone System	7/14/00	10,350				10,350	7	MO S/L	10,350	0
40	Symantic PC Anywhere	7/14/00	105				105	5	MO S/L	105	0
41	NEC 17 inch monitor	9/29/00	251				251	5	MO S/L	251	0
42	Electrical improvements	1/14/00	111				111	10	MO S/L	111	0
43	Building Improvement-walls	1/31/00	1,612				1,612	10	MO S/L	1,599	13
44	Building Improvement - painting	1/31/00	6,986				6,986	10	MO S/L	6,927	59
45	Building improvements	2/15/00	3,263				3,263	10	MO S/L	3,235	28
46	Building Improvement - Painting	2/15/00	5,745				5,745	10	MO S/L	5,698	47
47	Building Improvement - Painting	7/31/00	691				691	10	MO S/L	650	41
48	Building Improvements - Painting	8/31/00	1,125				1,125	10	MO S/L	1,050	75
49	Building Improvement - Electrical	11/15/00	4,511				4,511	10	MO S/L	4,135	376
50	Garage Doors	2/15/00	8,526				8,526	20	MO S/L	4,227	427
51	Carpet	3/23/00	10,000				10,000	10	MO S/L	9,750	250
52	Carpet	7/05/00	23,868				23,868	10	MO S/L	22,675	1,193
53	Carpet	11/10/00	8,000				8,000	10	MO S/L	7,333	667
54	Carpet	11/21/00	18,801				18,801	10	MO S/L	17,077	1,724
55	Building Improvements	2/15/00	741				741	10	MO S/L	735	6
256	STORAGE BUILDING	1/01/54	502				502	30	MO S/L	502	0
257	SANITARY BUILDING #21	1/01/54	3,073				3,073	30	MO S/L	3,073	0
258	ORIGINAL CAMP	1/01/55	3,000				3,000	0	-- Land	0	0
259	COOK'S CABIN	1/01/56	3,048				3,048	30	MO S/L	3,048	0
260	CRAFTS BUILDING	1/01/57	19,187				19,187	30	MO S/L	19,187	0
261	DINING HALL/KITCHEN	1/01/66	32,329				32,329	30	MO S/L	32,329	0
262	FERWEDA FARM-HAYING FIELD	1/01/74	25,500				25,500	0	-- Land	0	0
263	ADDITIONAL PARCEL	1/01/75	36,500				36,500	0	-- Land	0	0
264	LAND IMPROVEMENT	1/01/75	30,000				30,000	30	MO S/L	29,000	1,000
265	SANITARY #1	1/01/79	30,327				30,327	30	MO S/L	30,327	0
266	DIRECTOR'S BUILDING	1/01/80	23,465				23,465	30	MO S/L	22,683	782
267	FIRST AID BUILDING	1/01/80	15,855				15,855	30	MO S/L	15,328	527
268	CARETAKER'S HOME	1/01/80	20,838				20,838	30	MO S/L	20,144	694
269	COOKIES CABIN	1/01/81	7,300				7,300	30	MO S/L	6,813	243
270	CABINS 14 AMP	1/01/81	91,000				91,000	30	MO S/L	84,933	3,033
271	CRAFTS BUILDING IMPROVEMENT	1/01/85	2,372				2,372	2	MO S/L	2,372	0
272	NEW CABINS	1/01/87	7,715				7,715	30	MO S/L	5,915	257
273	CARETAKER'S HOME ADDITION	1/01/87	1,490				1,490	30	MO S/L	1,142	50

38-1434224

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
274	BARN IMPROVEMENT	1/01/87	12,505				12,505	30	MO S/L	9,587	417
276	NEW ELECTRICAL SYSTEM	1/01/92	42,500				42,500	40	MO S/L	19,125	1,063
279	COLOR TELEVISION CT 1910M	12/01/91	1,465				1,465	5	MO S/L	1,465	0
280	AUDIO VISUAL CART	1/01/82	132				132	10	MO S/L	132	0
283	VIDEO STAND	1/01/84	175				175	10	MO S/L	175	0
286	BELL AND HOWELL PROJECTOR	1/15/85	997				997	10	MO S/L	997	0
287	CONV HAND TRUCK	1/15/85	176				176	10	MO S/L	176	0
289	DESK	1/01/90	435				435	0	-- Memo	435	0
290	TENSCO BOOK CASE	1/01/90	106				106	0	-- Memo	106	0
292	KITCHEN IMPROVEMENTS	6/01/95	8,935				8,935	40	MO S/L	3,258	223
293	KITCHEN IMPROVEMENTS	6/01/96	3,565				3,565	40	MO S/L	1,211	89
294	DISPENSE-MATIC LABEL DISPENSER	1/01/86	425				425	10	MO S/L	425	0
295	GOLDSTAR	1/01/86	229				229	5	MO S/L	229	0
296	INTERIOR SIGNS	7/01/90	7,284				7,284	20	MO S/L	7,103	181
297	3 COMPUTER STANDS	1/01/87	275				275	10	MO S/L	275	0
298	PARKING LOT SIGNS	7/01/90	755				755	10	MO S/L	755	0
299	EMS MEMORY BOARD	1/01/95	599				599	0	-- Memo	599	0
301	BIKE RACK	7/01/90	300				300	10	MO S/L	300	0
303	PHOTOGRAPHS - INTERIOR COMMON	8/01/90	9,393				9,393	20	MO S/L	9,119	274
305	OFFICE EQUIPMENT (KEN'S)	2/01/90	2,334				2,334	7	MO S/L	2,334	0
306	CART	2/01/90	100				100	10	MO S/L	100	0
307	CREDENZA LEGS	2/01/90	147				147	10	MO S/L	147	0
308	EXTINGUISHERS (7)	2/01/90	462				462	10	MO S/L	462	0
309	OFFICE EQUIPMENT (BECKETT)	4/01/90	2,459				2,459	7	MO S/L	2,459	0
310	VARIOUS FURNITURE (ALLIED OFFIC	5/01/90	72,050				72,050	10	MO S/L	72,050	0
311	IBM COMPUTER/HP PRINTER	11/01/93	3,455				3,455	5	MO S/L	3,455	0
312	LIBERTY SOFTWARE	11/01/93	559				559	5	MO S/L	559	0
313	OFFICE EQUIPMENT (BECKETT)	6/01/90	244				244	7	MO S/L	244	0
314	FURNITURE	7/01/90	238				238	10	MO S/L	238	0
316	COMPUTER	7/01/94	3,772				3,772	5	MO S/L	3,772	0
317	FURNITURE - ALLIED OFFICE INTERI	12/01/90	4,526				4,526	10	MO S/L	4,526	0
318	2 PLANTERS WITH PLANTS	2/01/91	754				754	10	MO S/L	754	0
319	FOLDING TABLES (ALLIED OFFICE)	8/01/91	3,848				3,848	10	MO S/L	3,848	0
320	CARPET CLEANER	4/01/97	1,588				1,588	10	MO S/L	1,588	0
321	CHAIRS	7/01/97	2,032				2,032	10	MO S/L	2,032	0
322	COMPUTER SOFTWARE	4/01/96	994				994	5	MO S/L	994	0
323	HP LASERJET MEMORY UPGRADE	4/01/96	243				243	5	MO S/L	243	0
324	HP LASERJET	4/01/96	1,616				1,616	5	MO S/L	1,616	0
326	VARIOUS COMPUTER HARDWARE	4/01/96	1,438				1,438	5	MO S/L	1,438	0
327	VARIOUS COMPUTER HARDWARE	12/01/96	5,910				5,910	5	MO S/L	5,910	0
328	14	8/01/96	350				350	5	MO S/L	350	0
329	AUTOMATED INFORMATION COMPUTE	1/01/97	3,595				3,595	5	MO S/L	3,595	0
330	LINKED TECHNOLOGIES COMPUTER	6/01/97	2,035				2,035	5	MO S/L	2,035	0
331	MITA DC-5090 COPIER	3/01/98	13,690				13,690	7	MO S/L	13,690	0
332	ZIP DRIVES	2/01/98	337				337	5	MO S/L	337	0
333	COMPUTER EQUIPMENT	2/01/98	788				788	5	MO S/L	788	0
334	CD-ROM	2/01/98	60				60	5	MO S/L	60	0
335	COMPUTER EQUIPMENT	3/01/98	335				335	5	MO S/L	335	0
336	2 ATX PENTIUM COMPUTERS	6/01/98	5,185				5,185	5	MO S/L	5,185	0
337	INTEL PENTIUM COMPUTER	7/01/98	2,580				2,580	5	MO S/L	2,580	0
338	FURNITURE & FIXTURES	7/01/98	3,813				3,813	7	MO S/L	3,813	0
339	DIGITAL MAVICA CAMERA	9/01/98	685				685	7	MO S/L	685	0
340	SOFTWARE	12/01/98	731				731	3	MO S/L	731	0
341	VIDEO SOUND CARD	12/01/98	266				266	3	MO S/L	266	0
342	BARN RESTORATION	7/01/92	24,500				24,500	40	MO S/L	10,719	612
343	HP DESKJET (B/W)	4/01/96	323				323	5	MO S/L	323	0
345	LINKED TECHNOLOGIES COMPUTER	2/15/99	1,981				1,981	5	MO S/L	1,981	0
347	PRINTER	4/15/99	137				137	5	MO S/L	137	0
348	LINKED TECHNOLOGY - 2 COMPUTER	4/15/99	6,864				6,864	5	MO S/L	6,864	0
349	LINKED TECHNOLOGY - NOVELL NET	4/30/99	1,445				1,445	3	MO S/L	1,445	0
350	CAMPAIGN SOFTWARE AND LICENSE	5/14/99	10,056				10,056	3	MO S/L	10,056	0
351	LINKED TECHNOLOGIES - COMPUTER	5/28/99	315				315	5	MO S/L	315	0
352	EXPENSES TO PUT CAMPAIGN SOFTW	6/30/99	829				829	3	MO S/L	829	0
353	LINKED TECHNOLOGIES - COMPUTER	7/15/99	5,267				5,267	5	MO S/L	5,267	0
354	4 SCANNABLE PLEDGE PROCESSING	7/30/99	14,980				14,980	5	MO S/L	14,980	0
356	ART EXPLOSION 600K	11/30/99	80				80	3	MO S/L	80	0
357	SOFTWARE - ADOBE & OFFICE PREMI	12/15/99	968				968	3	MO S/L	968	0
358	INTERIOR DECORATORS FEES	12/30/99	1,238				1,238	10	MO S/L	1,238	0
359	CAMPAIGN SOFTWARE CONVERSION	12/30/99	910				910	3	MO S/L	910	0
360	INTERIOR PAINTING	12/31/99	7,029				7,029	10	MO S/L	7,029	0
361	PARTITION WALL AND HAND RAIL	12/31/99	1,009				1,009	40	MO S/L	252	25

38-1434224

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
362	STROSACKER IMPROVEMENTS - THRI	12/31/99	10,346			10,346	40 MO S/L	2,587	258
363	MITA DC-5090 COPIER	1/15/99	9,792			9,792	5 MO S/L	9,792	0
366	INFOCUS LP400 PROJECTOR	4/30/99	2,859			2,859	5 MO S/L	2,859	0
367	Kitchen Stove	7/06/01	3,565			3,565	7 MO S/L	3,565	0
368	Commercial Refrigerator	7/06/01	1,957			1,957	7 MO S/L	1,957	0
369	Office Furniture - Desks, Dividers	5/15/01	6,141			6,141	7 MO S/L	6,141	0
370	17" Computer Monitor	5/22/01	1,127			1,127	5 MO S/L	1,127	0
371	Computer Hardware	9/25/01	6,220			6,220	5 MO S/L	6,220	0
372	Nikon Camera and Equipment	9/29/01	1,017			1,017	5 MO S/L	1,017	0
373	Computer Software	11/09/01	509			509	3 MO S/L	509	0
374	Dell Computer	11/13/01	1,742			1,742	5 MO S/L	1,742	0
375	Dell Computer & Printer	11/27/01	3,231			3,231	5 MO S/L	3,231	0
376	Magicolor LaserJet Printer	12/07/01	1,970			1,970	5 MO S/L	1,970	0
377	HP SanJet 7450C Scanner	12/07/01	672			672	5 MO S/L	672	0
378	Nortel Phone System - Used	12/11/01	500			500	5 MO S/L	500	0
379	Building Improvements - Network Cabling	4/17/01	46,624			46,624	10 MO S/L	40,407	4,663
380	Building Improvements - Wiring/Electrical	5/11/01	2,349			2,349	10 MO S/L	2,036	235
381	Building Improvements - Interior Finishes	6/30/01	2,550			2,550	10 MO S/L	2,168	255
382	Building Improvements	7/31/01	810			810	10 MO S/L	682	81
383	Building Improvements - Backup Fixtures	8/24/01	635			635	10 MO S/L	529	64
384	Building Improvements	10/15/01	26,771			26,771	10 MO S/L	22,086	2,677
385	Building Improvements - Painting	11/27/01	10,029			10,029	10 MO S/L	8,107	1,003
386	Building Improvements - Carpeting	12/28/01	3,104			3,104	10 MO S/L	2,483	311
388	Office Furniture	7/15/02	517			517	7 MO S/L	517	0
389	Various Computer Hardware	1/15/02	1,278			1,278	5 MO S/L	1,278	0
390	Various Computer Hardware	10/15/02	1,433			1,433	5 MO S/L	1,433	0
391	Various Computer Hardware	12/15/02	2,285			2,285	5 MO S/L	2,285	0
392	4 Dell Pentium, 1.8 GHZ computers	6/15/02	5,016			5,016	5 MO S/L	5,016	0
393	Bldg Improvements	1/15/02	1,796			1,796	10 MO S/L	1,436	180
394	Bldg Improvements-carpeting	1/15/02	3,581			3,581	10 MO S/L	2,865	358
395	Bldg Improvements-Carpeting	2/15/02	5,591			5,591	10 MO S/L	4,426	559
396	Bldg Improvements-carpeting	2/15/02	1,219			1,219	10 MO S/L	965	122
397	Bldg Improvements-carpet	9/15/02	4,409			4,409	10 MO S/L	3,233	441
398	Bldg Improvements	9/15/02	1,981			1,981	10 MO S/L	1,453	198
399	Painting	1/15/02	4,827			4,827	10 MO S/L	3,862	483
400	Painting	2/15/02	5,047			5,047	10 MO S/L	3,996	504
401	Painting	9/15/02	10,347			10,347	10 MO S/L	7,588	1,034
402	Painting	10/15/02	1,913			1,913	10 MO S/L	1,387	191
403	Bldg Improvements	1/15/02	6,409			6,409	10 MO S/L	5,127	641
404	Bldg Improvements	2/15/02	15,220			15,220	10 MO S/L	12,049	1,522
405	Building Improvements	9/15/02	2,248			2,248	10 MO S/L	1,648	225
406	Bldg Improvements	7/15/02	4,197			4,197	10 MO S/L	3,147	420
407	Scanning Equipment	10/15/02	14,034			14,034	5 MO S/L	14,034	0
408	Bldg Improvements	10/15/02	2,269			2,269	10 MO S/L	1,645	227
410	Scanning Equipment	5/30/03	12,500			12,500	5 MO S/L	12,500	0
411	Scannable Pledge Processing System	7/31/03	14,846			14,846	5 MO S/L	14,846	0
413	HP LJ 4200 Printer	9/15/03	1,485			1,485	5 MO S/L	1,485	0
414	Snowblower	12/12/03	900			900	5 MO S/L	900	0
415	Building Improvements	12/23/03	861			861	10 MO S/L	516	86
416	Fence at waterfront- Camping Council	1/01/03	7,306			7,306	20 MO S/L	2,557	365
417	Boardwalk at waterfront- Camping Council	1/01/03	6,690			6,690	20 MO S/L	2,342	334
418	Sea wall	1/01/03	4,800			4,800	20 MO S/L	1,680	240
419	Docks	1/01/03	2,497			2,497	20 MO S/L	874	125
420	Docks	1/01/03	4,372			4,372	20 MO S/L	1,530	219
421	United eWay electronic pledging	1/28/04	5,000			5,000	3 MO S/L	5,000	0
423	3200 MP Projector	2/27/04	1,444			1,444	5 MO S/L	1,444	0
424	New Fire System	3/31/04	8,995			8,995	7 MO S/L	7,389	1,285
425	HP CLJ3700 printer	4/30/04	1,275			1,275	3 MO S/L	1,275	0
426	Power Edge Server	7/15/04	6,044			6,044	5 MO S/L	6,044	0
427	Adobe Software	8/13/04	555			555	3 MO S/L	555	0
428	Speaker phone-conf room	11/15/04	719			719	5 MO S/L	719	0
429	Renovation of Suite 202	2/13/04	9,051			9,051	10 MO S/L	5,355	905
430	Roofing in Suite 104	9/15/04	2,139			2,139	10 MO S/L	1,141	214
431	Bldg Improvements-caulking	9/30/04	4,372			4,372	10 MO S/L	2,295	438
432	Caretaker's Home	1/01/04	76,974			76,974	30 MO S/L	15,395	2,566
433	Septic System	1/01/04	37,420			37,420	30 MO S/L	7,484	1,247
434	Phone System-Thermico	5/27/05	2,535			2,535	7 MO S/L	1,659	363
435	Dell-Computer Equipment & Laptop	7/29/05	2,162			2,162	5 MO S/L	1,910	252
436	Cubicle additions (receptionist station)	7/15/05	676			676	10 MO S/L	304	68
437	Building Impr-Painting	5/27/05	3,624			3,624	10 MO S/L	1,661	363
438	Bldg renovations-suite reconfiguration	6/30/05	32,229			32,229	10 MO S/L	14,503	3,223

38-1434224

Federal Asset Report

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
439	Asphalt & seal in parking lots	10/14/05	2,900			2,900	20 MO S/L	616	145
440	Boiler	10/14/05	39,990			39,990	20 MO S/L	8,498	1,999
441	AV system-conf room 110	11/15/05	8,368			8,368	7 MO S/L	4,981	1,195
442	Laptop computer	1/08/04	1,735			1,735	5 MO S/L	1,735	0
443	Laptop computer	1/08/04	1,735			1,735	5 MO S/L	1,735	0
444	Printer	1/08/04	549			549	5 MO S/L	549	0
445	Camp Neyati-impr	1/01/05	31,630			31,630	15 MO S/L	10,543	2,109
446	Dell Dimension 9150 Pentiumwm - Comm. D	4/13/06	1,440			1,440	5 MO S/L	1,080	288
447	Adobe Software Package	4/28/06	2,183			2,183	5 MO S/L	1,601	436
448	Wiring-Courthouse Square Ste. 2100	8/15/06	542			542	10 MO S/L	185	54
449	Fiber Optics Network	8/15/06	22,078			22,078	20 MO S/L	3,772	1,104
450	Strosacker Center Roof	10/31/06	43,401			43,401	30 MO S/L	4,581	1,447
451	2-Kyocera KM-5035 copiers	12/29/06	19,600			19,600	5 MO S/L	11,760	3,920
452	CISCO PIX 560# firewall	5/23/06	1,000			1,000	7 MO S/L	512	143
453	Camp Neyati-Improvements	12/31/06	24,809			24,809	15 MO S/L	4,962	1,654
454	Compressor	8/15/07	14,620			14,620	20 MO S/L	1,767	731
455	Signage	9/14/07	2,323			2,323	10 MO S/L	542	232
456	Install Access panel in ceiling	7/13/07	1,365			1,365	15 MO S/L	227	91
457	Mini-split air conditioner in server room	11/15/07	3,872			3,872	10 MO S/L	839	387
458	Bldg Improvements - Suite 101 Entrance	12/28/07	969			969	15 MO S/L	129	65
459	Dell Laptop - 2-1-1 Development	1/31/07	1,489			1,489	5 MO S/L	869	297
460	Dell Pentium computer - Finance Director	2/28/07	993			993	5 MO S/L	563	198
461	Dell Pentium D 40Ghz computer	3/30/07	993			993	5 MO S/L	546	199
462	4 - Dell Pentium Computers	4/30/07	3,564			3,564	5 MO S/L	1,901	713
463	Dell Pentium Computer - Executive Directo	6/15/07	706			706	5 MO S/L	365	141
464	Office Furniture - Executive Director	10/15/07	2,270			2,270	10 MO S/L	511	227
465	Nikon D40 Digital Camera	12/28/07	575			575	5 MO S/L	230	115
466	FIA - Ann Fillmore - HP Pavilion Laptop	12/28/07	1,098			1,098	5 MO S/L	439	220
468	Camp Neyati - Improvements	12/31/07	13,382			13,382	15 MO S/L	1,784	892
469	Camp Neyati improv	12/31/08	4,506			4,506	15 MO S/L	300	301
470	TB828 snow blower	3/14/08	800			800	5 MO S/L	293	160
471	Fire safe	3/14/08	1,599			1,599	15 MO S/L	195	107
472	Roof repair	7/31/08	679			679	10 MO S/L	96	68
473	Alarm equipment	9/15/08	2,800			2,800	5 MO S/L	747	560
474	garbage disposal	9/15/08	689			689	5 MO S/L	184	138
475	HP 4700N printer	10/15/08	1,222			1,222	5 MO S/L	305	245
476	phone system upgrade	11/14/08	817			817	5 MO S/L	191	163
477	Directory software	3/13/09	922			922	5 MO S/L	154	184
478	Chiller repair	3/31/09	946			946	10 MO S/L	71	95
479	Boiler & chiller repair	5/29/09	1,137			1,137	10 MO S/L	66	114
480	Hurley Memorial Bench	7/16/09	780			780	10 MO S/L	33	78
481	Automatic Door Sensors	8/31/09	1,904			1,904	7 MO S/L	91	272
482	Sewage pump	10/15/09	1,386			1,386	7 MO S/L	49	198
483	Camp Neyati-improvements	12/31/09	36,705			36,705	15 MO S/L	0	2,447
484	Roof Repairs	2/12/10	828			828	10 MO S/L	0	76
485	Leak repairs on roof	3/24/10	1,899			1,899	10 MO S/L	0	142
486	Tech Soup Software	4/14/10	640			640	3 MO S/L	0	160
487	Dell computer	4/14/10	751			751	5 MO S/L	0	113
488	Dell computer	4/14/10	638			638	5 MO S/L	0	96
489	Peachtree 2010 Software	4/14/10	673			673	2 MO S/L	0	252
490	Dell Vostro 1520 Laptop	5/14/10	764			764	5 MO S/L	0	102
491	New garbage disposal & installation	8/13/10	620			620	5 MO S/L	0	52
492	Mats for building	8/31/10	1,909			1,909	5 MO S/L	0	127
493	Lighting retrofit	10/29/10	21,557			21,557	10 MO S/L	0	359
494	Sequencers & Sensors	11/15/10	3,530			3,530	10 MO S/L	0	59
495	Ratclik Property - VL @ Hunter	12/31/10	18,000			18,000	0 -- Land	0	0
496	Camp Neyati Land improvements	12/31/10	25,246			25,246	15 MO S/L	0	0
Total Other Depreciation			4,327,928			4,327,928		2,362,046	132,171
Total ACRS and Other Depreciation			4,327,928			4,327,928		2,362,046	132,171

Amortization:

302	HP Y FONT (LASERJET PRINTER)	6/01/90	469			469	5 MO Amort	469	0
412	Computer Memory & Hardware	10/31/03	813			813	3 MO Amort	813	0

Federal Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
			<u>1,282</u>			<u>1,282</u>		<u>1,282</u>	<u>0</u>
	Grand Totals		4,329,210			4,329,210		2,363,328	132,171
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>4,329,210</u>			<u>4,329,210</u>		<u>2,363,328</u>	<u>132,171</u>

Federal Statements**Tax-Exempt Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
Interest Income	\$ 11,931			14 MI		
Total	<u>\$ 11,931</u>					

Tax-Exempt Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
Dividend income	\$ 43,406			14 MI		
Total	<u>\$ 43,406</u>					

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Parking	\$ 8,536	\$ 8,536	\$	\$
Equipment rental & maint	5,410	1,538	620	3,252
Membership dues	2,322	1,031	1,167	124
Behavioral risk survey	2,000	2,000		
Total	<u>\$ 18,268</u>	<u>\$ 13,105</u>	<u>\$ 1,787</u>	<u>\$ 3,376</u>

Federal Statements**Schedule A, Part II, Line 5 - Excess Gifts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$ 8,958,122	\$ 8,388,491
Total	\$ 8,958,122	\$ 8,388,491

Form 990-T - Other Deductions Not Taken Elsewhere

<u>Description</u>	<u>Amount</u>
Supplies	\$ 1,875
Misc. building expenses	893
Custodial services	2,500
Total	\$ 5,268

Forms 990 / 990-EZ Return Summary

For calendar year 2010, or tax year beginning _____, and ending _____

38-1434224

United Way of Midland County

Net Asset / Fund Balance at Beginning of Year 10,067,794

Revenue

Contributions	5,607,930
Program service revenue	113,908
Investment income	55,337
Capital gain / loss	-2,214

Special events:

Gross revenue	_____
Direct expenses	_____

Net income

Other income	138,019
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Total revenue

5,912,980

Expenses

Program services	5,214,270
Management and general	155,037
Fundraising	381,638

Total expenses

5,750,945

Excess / (deficit)

162,035

Other changes

385,422

Net Asset / Fund Balance at End of Year

10,615,251

Reconciliation of Revenue

Total revenue per financial statements 5,984,020

Less:

Unrealized gains	373,085
Donated services	_____
Recoveries	_____
Other	285,936

Plus:

Investment expenses	_____
Other	587,981
Total revenue per return	5,912,980

Reconciliation of Expenses

Total expenses per financial statements 5,436,563

Less:

Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	273,599

Plus:

Investment expenses	_____
Other	587,981
Total expenses per return	5,750,945

Balance Sheet

	Beginning	Ending	Differences
Assets	10,639,242	11,298,829	
Liabilities	571,448	683,578	
Net assets	10,067,794	10,615,251	547,457

Miscellaneous Information

Amended return _____

Return / extended due date 05/16/11

Failure to file penalty _____

Form 990-T Return Summary

For calendar year 2010, or tax year beginning _____, and ending _____

38-1434224

United Way of Midland County

Income

Gross profit			
Capital gain / loss			
Unrelated debt-financed income			
All other income	10,396		
Total income		10,396	

Deductions

Officer compensation			
Salaries			
All other deductions	9,957		
Net operating loss			
Specific deduction	1,000		
Total deductions		10,957	

Unrelated business taxable income

-561

Taxes / Credits / Payments

Regular tax			
Proxy tax			
Alternative minimum tax			
Tax			
Foreign tax credit			
Other credits			
General business credits			
Prior year minimum tax credit			
Total nonrefundable credits			
Other taxes			
Total tax			
Estimated tax payments			
Paid with extension			
Tax withheld			
Other credits / payments			
Estimated tax penalty			
Overpayment applied to next year's tax			
Payments / penalty / application			
Net tax due			

Additions to Tax

Interest on late payments			
Failure to file penalty			
Failure to pay penalty			
Total additions			

Balance due

Refund

Next Year's Estimates

1st quarter		
2nd quarter		
3rd quarter		
4th quarter		
Total		

Miscellaneous Information

Amended return _____
 Return / extended due date 05/16/11