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)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ΑF	or the	2011 calendar year, or tax year beginning JUL 1, 2011 and e	nding J	UN 30, 2012	
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	UNITED WAY OF THE BAY AREA			
	Name change	Doing Business As		94-1	312348
	Initial return	Training and cure for the second man to the second man in the seco	Room/suite	E Telephone number	
	Termin- ated	221 MAIN STREET 3	00	415-	808-4300
	Amende return	City or town, state or country, and zir + 4		G Gross receipts \$	38,423,879.
	Applica tion	BAN TRANCIBEO, CH 34103		H(a) Is this a group re	
	pending	F Name and address of principal officer:ANNE WILDON		for affiliates?	Yes X No
	.,	SAME AS C ABOVE		H(b) Are all affiliates inc	
		mpt status: X 501(c)(3) 501(c) ()	r 527	1	list. (see instructions)
		e: ► WWW.UWBA.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 1922 N	State of legal domicile: CA
P	art I	Summary		CAMALYCH HII	AM DIADIEC
ě	1 E	Briefly describe the organization's mission or most significant activities: TO BE	THE	CATALYST TH	AT ENABLES
and	-	PEOPLE TO STRENGTHEN THEIR COMMUNITIES BY			
Activities & Governance	1	Check this box if the organization discontinued its operations or dispose		1 1	
Š		Number of voting members of the governing body (Part VI, line 1a)			34
જ		Number of independent voting members of the governing body (Part VI, line 1b)			111
ies	1	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		1 (43835
ξ		otal number of volunteers (estimate if necessary)			43633
Ac		otal unrelated business revenue from Part VIII, column (C), line 12			0.
	bl	Net unrelated business taxable income from Form 990-T, line 34			
		2 (1) (2 (4))		Prior Year 31,958,389.	Current Year 32,748,141.
ne	1	Contributions and grants (Part VIII, line 1h)		456,283.	390,753.
Revenue	1	Program service revenue (Part VIII, line 2g)		845,363.	583,826.
Re	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.00.	-3,369.
	4	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		33,260,035.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		21,521,438.	20,954,821.
		Grants and similar amounts paid (Part IX, column (A), lines 1·3)		0.	0.
	1	Renefits paid to or for members (Part IX, column (A), line 4)	1	9,285,509.	8,925,281.
Expenses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ben	loa r	Fotal fundraising expenses (Part IX, column (A), line 17e) 2,913,26	7.		
X	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	200000	3,952,204.	3,870,876.
	1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	•	34,759,151.	33,750,978.
	1	Revenue less expenses. Subtract line 18 from line 12	1	-1,499,116.	-31,627.
or es	,,,,,	tevenue less expenses. Outstruct and to from time the		ginning of Current Year	End of Year
Net Assets or Fund Balances	20 1	Fotal assets (Part X, line 16)		23,294,930.	22,688,895.
Ass Ba	21	Fotal liabilities (Part X, line 26)		8,229,196.	12,260,304.
Z.Set	22	Net assets or fund balances. Subtract line 21 from line 20		15,065,734.	10,428,591.
	art II	Signature Block			
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	y knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of whi			
-					
Sig	n	Signature of officer		Date	
Hei	re		ADMI	N.	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	(Date Check	PTIN
Paid	d [TRACY PAGLIA	٥	21213 self-employe	
Pre	parer	Firm's name ► MOSS ADAMS LLP		Firm's EIN	91-0189318
Use	Only	Firm's address 3121 WEST MARCH LANE, SUITE 100			00000
***************************************		STOCKTON, CA 95219		Phone no. (209)955-6100
Mai	u tha ID	S discuss this return with the preparer shown above? (see instructions)			X Yes No

orm	TOOU (EUT 1)	age Z
Pa	Statement of Program Service Accomplishments	T
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	C
	TO BE THE CATALYST THAT ENABLES PEOPLE TO STRENGTHEN THEIR COMMUNITIE	
	BY INVESTING IN ONE ANOTHER.	
2	Did the organization undertake any significant program services during the year which were not listed on	Management of the Control of the Con
-	the prior Form 990 or 990-EZ?	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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 17,254,836. including grants of \$ 17,254,836.) (Revenue \$ 370,65	<u>3.</u>)
	GROSS FUNDS AWARDED/ALLOCATED TO AGENCIES	
	1 026 220 2 060 727	
4b		0.)
	SPARKPOINT - FOR DECADES UWBA HAS PARTNERED AND CONVENED ACROSS	
	SECTORS, CONTRIBUTED TO POLICY, AND MANAGED PROGRAMS THROUGH THE BAY AREA COMMUNITY FUND. UWBA HAS IDENTIFIED AND INVESTED - BOTH	
	FINANCIALLY AND THROUGH TECHNICAL ASSISTANCE - IN MORE THAN 250	
	HIGH-PERFORMING LOCAL PROGRAMS THAT CREATE, PROMOTE, OR PROTECT	
	FINANCIAL STABILITY BY SUPPORTING CHILDREN AND YOUTH, WORKING FAMILIE	'S
	AND COMMUNITIES. THE RELATIONSHIPS, EXPERIENCE, AND SYNERGY STEMMING	,,,
	FROM THIS WORK, AID THE GROUNDWORK FOR UNITED WAY TO BUILD THE	
	SPARKPOINT INITIATIVE. SPARKPOINT CENTERS OFFER A RANGE OF SERVICES I	N
	ONE LOCATION FOR PEOPLE IN POVERTY TO MOVE THEMSELVES TO ECONOMIC	- 11
	SUCCESS. IN FY12, SPARKPOINT SERVED APPROXIMATELY 5,000 INDIVIDUALS I	N
	TOTAL FROM THE SEVEN COUNTIES. THE SPARKPOINT CENTER OFFERS MULTIPLE	
4-	200 000	
4c	(Code:)(Expenses \$ 2,045,799. including grants of \$ 300,000.) (Revenue \$ 211 - 211 BAY AREA STRENGTHENS THE COMMUNITY BY ADDRESSING THE	/
	CHALLENGES PEOPLE FACE OBTAINING NEEDED HEALTH AND HUMAN SERVICES IN	
	EVERYDAY LIFE AND IN TIMES OF PERSONAL CRISIS. IN TIMES OF DISASTER,	
	211 BECOMES AN ESSENTIAL PART OF OUR RESPONSE AND RECOVERY. AS AN	
	EASY-TO-REMEMBER PHONE NUMBER, 211 PROVIDES CALLERS WITH INFORMATION	
	ABOUT AND REFERRALS TO ESSENTIAL SERVICES. TRAINED STAFF ANSWERS CALL	S
	24 HOURS-A-DAY, SEVEN DAYS A WEEK, WITH THE ABILITY TO RESPOND IN THE	1
	CALLER'S LANGUAGE THROUGH BILINGUAL STAFF AND TELE-INTERPRETING	
	SERVICES. IN FY12, 211 RECEIVED 196,520 CALLS IN THE 7 COUNTIES OF T	HE
	BAY AREA.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 3,810,371 • including grants of \$ 339,248 •) (Revenue \$ 20,100 •)	
4e	Total program service expenses ► 27,947,226.	

Form 990 (2011) UNITED WAY O Part IV Checklist of Required Schedules

	Chooking of Required Contraction		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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		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	4	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	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	6	Х	
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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b		X
С	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	11c		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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		^
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	Х	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	Х	
	Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year?	120	11	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	T		
J	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	15		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	16		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	17		Х
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	18	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	19	-	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	

UNITED WAY OF THE BAY AREA Form 990 (2011) UNITED WAY OF THE Part IV Checklist of Required Schedules (continued)

3 C	Officerial of Required Contidues (continues)	T		
	District in the second country of 000 of create and other assistance to any apparament or organization in the		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
00	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21		
22		22		Х
02	column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
270	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	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	25a		Х
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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			l
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	34		X
35a	•	35a		X
b				
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
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	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		37	1
	Note. All Form 990 filers are required to complete Schedule O	38	<u>X</u>	

	*V Statements Regarding Other IRS Filings and Tax Compliance	ayay waxaya waxaa ahaa ahaa ahaa ahaa ahaa ahaa ah						
<u> </u>	Check if Schedule O contains a response to any question in this Part V							
		,	1	p	Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	38	- 3000000000000000000000000000000000000				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	able gaming					
	(gambling) winnings to prize winners?			1c	X	200000000000000000000000000000000000000		
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		111	-				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?		2b	X			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X		
	ii 100; iido k iiiod a 10iiii 000 i 10i iiio 70iii 110; promono 110i iiio 70iii 110			3b	ļ			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other							
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		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							
5a				5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action'	?	5b		X		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	ļ			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the org	anization solicit					
	any contributions that were not tax deductible?			6a	-	X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions c	or gifts					
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).				37			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s			1	X	ļ		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	ļ		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	quired					
	to file Form 8282?	1	I	7c		X		
d				-		v		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con			7f		Λ_		
9	If the organization received a contribution of qualified intellectual property, did the organization file f			7g		ļ		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.					X		
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t ally til	ne during the year?	8		21		
9	Sponsoring organizations maintaining donor advised funds.			9a		X		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X		
10	-			90				
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a						
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		1				
11	Section 501(c)(12) organizations. Enter:	100	1	1				
''	Gross income from members or shareholders	11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1.0		1				
b	amounts due or received from them.)	11b						
12a			?	12a	90000000000	00000000000		
b		12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1				
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
-	Note. See the instructions for additional information the organization must report on Schedule O.							
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		13c						
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х		

Form **990** (2011)

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

X

UNITED WAY OF THE BAY AREA

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

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.

Sec	tion A. Governing Body and Management				
		34		Yes	No
1a	Little the humber of voting members of the governing soa, at the size of the text, ear	34			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	33			
b	Little the humber of voting members included in line 1a, above, who are independent	33			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	v
	officer, director, trustee, or key employee?	-	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			ı	v
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?	-	6		Λ
7a			_		v
	more members of the governing body?	··· -	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				17
	persons other than the governing body?	 	7b	333333333	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			***************************************	
а	• • • • • • • • • • • • • • • • • • • •		8a	X	
b	· · · · · · · · · · · · · · · · · · ·	···· -	8b	Х	
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	<u></u>	9	ļ	X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				ļ
		Г		Yes	No
	Did the organization have local chapters, branches, or affiliates?	··· -	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	? [11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			37	
12a			12a	X	ļ
b			12b	Х	
С				.,	
	in Schedule O how this was done	····	12c	X	-
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	100000000
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?			v	
а	The organization's CEO, Executive Director, or top management official	····	15a	X	-
b	Other officers or key employees of the organization	E	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				v
	taxable entity during the year?		16a	**********	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b	L	
Sec	ction C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ►CA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s on	ıly) av	/allab	le	
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy	, and	finan	cial	
	statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	nizatio	on: 🖻	-	
	JOAN CATHERINE BRAUN - 415-808-4465				
	211 MAIN ST., STE. 300, SAN FRANCISCO, CA 94105				

6035581

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	/	not c	Pos			000	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	th an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	stee)	from	from related	other
	(describe	or director						the	organizations	compensation
	hours for	or di	88			sated		organization	(W-2/1099-MISC)	from the organization
	related organizations	trustee	trust		28	npeu		(W-2/1099-MISC)		and related
	in Schedule	dual t	nstitutional trustee		oldr	st co				organizations
	O)	Individual	Institu	Officer	Key employee	Highest compensated employee	Former			
(1) BETH COBERT										_
CHAIR OF THE BOARD	3.00	X		X				0.	0.	0.
(2) MICHAEL SCANLON										
IMMEDIATE PAST CHAIR	0.50	X						0.	0.	0.
(3) JEFFREY WOHL										_
GENERAL COUNSEL/CHIEF ETHICS OFFICER	0.80	X		Х				0.	0.	0.
(4) GWENDOLYN WONG									_	
TREASURER	0.80	X	<u> </u>	Х				0.	0.	0.
(5) CHARLES CUSTER										
SECRETARY	0.80	X		X			_	0.	0.	0.
(6) SUSAN SUTHERLAND			ļ							_
VICE CHAIR & CHAIR-ELECT	4.00	X		X		<u> </u>	_	0.	0.	0.
(7) LORETTA WALKER										
ASSISTANT SEC./CHAIR GOVERNANCE COMM	0.50	X		Х		ļ		0.	0.	0.
(8) MARGARET BAKER						ļ				_
CHAIR, AUDIT COMMITTEE	0.80	X	ļ			<u> </u>	_	0.	0.	0.
(9) SUSAN PORTUGAL										_
CHAIR COMMUNITY INVESTMENT COMMITTEE	1.00	X				ļ	ļ	0.	0.	0.
(10) RONALD PEYTON	0.00									
CHAIR DEVELOPMENT COMMITTEE	0.80	X	ـــ			-		0.	0.	0.
(11) TIMOTHY PAULSON	0 10									0
LABOR REPRESENTATIVE	0.10	X	 			-	-	0.	0.	0.
(12) LEONARD ALMALECH	0 10							0.	0.	
DIRECTOR AT LARGE	0.10	X	ļ		ļ	 	-	U.	0.	0.
(13) MICHELLE BANKS	0.50	,,							0.	0
DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(14) EDWARD BLAKEY	0 20	.,						0.	0.	0
DIRECTOR AT LARGE	0.30	X					╂	V •	U.	0.
(15) RONALD CATON	0 20	.,				:			0.	_
DIRECTOR AT LARGE	0.30	X	-	-			+-	0.	0.	0.
(16) WILLIAM CROTEAU	0 10	v						0.	0.	0.
DIRECTOR AT LARGE	0.10	X	+		-	-	╂	ļ	0.	0.
(17) MICHAEL DORSEY	0.50	x						0.	0.	0.
DIRECTOR AT LARGE	0.50	<u> </u>			<u> </u>	<u></u>		<u> </u>		Form 990 (2011)

132007 01-23-12

FORTH 990 (2011)										
Part VII Section A. Officers, Directors, To		mplo	yee			ligh	est			
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) CASSIE DOYLE										_
DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(19) PATRICK DUTERTE										
DIRECTOR AT LARGE	0.30	X	ļ			<u> </u>		0.	0.	0.
(20) LANCE FOX								_	_	
DIRECTOR AT LARGE	0.30	X						0.	0.	0.
(21) TODD GALLOWAY									_	
DIRECTOR AT LARGE	0.20	X						0.	0.	0.
(22) TIMOTHY GERAGHTY										
DIRECTOR AT LARGE	0.50	X						0.	0.	0.
(23) WALTER JOHNSON										•
DIRECTOR EMERITUS	0.10	X			<u> </u>	<u> </u>		0.	0.	0.
(24) SHELLEY KESSLER DIRECTOR AT LARGE	1.00	х						0.	0.	0.
(25) JOE LAYMON						 				
DIRECTOR AT LARGE	0.20	Х						0.	0.	0.
(26) NOAH LICHTENSTEIN										
DIRECTOR AT LARGE	0.50	Х						0.	0.	0.
1b Sub-total						>		0.	0.	0.
c Total from continuation sheets to Part	/II, Section A					>		1,416,047.	0.	248,657.
d Total (add lines 1b and 1c)	•							1,416,047.	0.	248,657.
2 Total number of individuals (including but						e) wl	no re	eceived more than \$100	0,000 of reportable	

compensation from the organization

Yes No X 3 X 4 Х

	line 1a? If "Yes," complete Schedule J for such individual
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

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on

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 .

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	NONE	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

Part W Section A. Officer, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (a)	(F) Estimated amount of other compensation from the organization and related organizations
C Name and title	Estimated amount of other compensation from the organization and related
C27) ARTHUR LOUIE	compensation from the organization and related
Director at large	
C28 CRISTANN MARTIN DIRECTOR AT LARGE O.10 X O. O.	0.
Director at large	0.
C29) ALFRED MOORE DIRECTOR AT LARGE O.50 X O. O.	0.
Director at large	ļ .
Carrest Carr	0
Director at large	0.
Columb	_
Director at large	0.
Coo	_
DIRECTOR AT LARGE 1.20 X	0.
(33) STEPHEN SEYMOUR DIRECTOR AT LARGE (34) REGINA STANBACK STROUD DIRECTOR AT LARGE (35) SHERRY TENNYSON DIRECTOR AT LARGE (36) ROBERT THOMPSON DIRECTOR AT LARGE (37) ANNE WILSON CEO (38) MICHAEL STEDMAN DIRECTOR AT LARGE (39) ERIC MCDONNELL COO (55).00 X 0.0 0.0 0.0 0.0 0.0 0.0	0
DIRECTOR AT LARGE 0.20 X 0.00. (34) REGINA STANBACK STROUD DIRECTOR AT LARGE 0.50 X 0.00. (35) SHERRY TENNYSON DIRECTOR AT LARGE 0.50 X 0.00. (36) ROBERT THOMPSON DIRECTOR AT LARGE 0.80 X 0.00. (37) ANNE WILSON CEO 55.00 X X 276,914. 0.00. (38) MICHAEL STEDMAN DIRECTOR AT LARGE 0.10 X 0.00. (39) ERIC MCDONNELL COO 55.00 X X 231,998. 0.00.	0.
(34) REGINA STANBACK STROUD 0.50 X 0.0.0 DIRECTOR AT LARGE 0.50 X 0.0.0 (35) SHERRY TENNYSON 0.0.0 0.50 X DIRECTOR AT LARGE 0.80 X 0.0.0 (37) ANNE WILSON 0.0.0 0.0.0 CEO 55.00 X X 276,914.0 (38) MICHAEL STEDMAN 0.0.0 0.0.0 (39) ERIC MCDONNELL 55.00 X X 231,998.0	0
DIRECTOR AT LARGE 0.50 X 0. 0. (35) SHERRY TENNYSON	0.
(35) SHERRY TENNYSON DIRECTOR AT LARGE (36) ROBERT THOMPSON DIRECTOR AT LARGE (37) ANNE WILSON CEO (38) MICHAEL STEDMAN DIRECTOR AT LARGE (39) ERIC MCDONNELL COO (35) SHERRY TENNYSON (36) O. (37) ANNE WILSON (37) ANNE WILSON (38) MICHAEL STEDMAN DIRECTOR AT LARGE (39) ERIC MCDONNELL COO (30) COO (31) COO (31) COO (32) COO (32) COO (34) COO (35) COO (36) COO (37) ANNE WILSON (38) MICHAEL STEDMAN (39) ERIC MCDONNELL (39) COO (30) COO (30) COO (30) COO (31) COO (31) COO (32) COO (32) COO (33) COO (34) COO (35) COO (36) COO (37) ANNE WILSON (38) MICHAEL STEDMAN (38) MICHAEL STEDMAN (39) ERIC MCDONNELL (39) COO (30) C	0
DIRECTOR AT LARGE 0.50 X 0. 0. (36) ROBERT THOMPSON 0.80 X 0. 0. (37) ANNE WILSON 55.00 X X 276,914. 0. (38) MICHAEL STEDMAN DIRECTOR AT LARGE 0.10 X 0. 0. (39) ERIC MCDONNELL COO 55.00 X X 231,998. 0.	0.
(36) ROBERT THOMPSON DIRECTOR AT LARGE 0.80 X (37) ANNE WILSON CEO 55.00 X (38) MICHAEL STEDMAN DIRECTOR AT LARGE 0.10 X (39) ERIC MCDONNELL 55.00 X COO 55.00 X	0.
DIRECTOR AT LARGE 0.80 X 0. 0. (37) ANNE WILSON (55.00 X X 276,914. 0. (38) MICHAEL STEDMAN DIRECTOR AT LARGE 0.10 X 0. (39) ERIC MCDONNELL COO 55.00 X 231,998. 0.	ļ
(37) ANNE WILSON CEO	0.
CEO	<u> </u>
(38) MICHAEL STEDMAN DIRECTOR AT LARGE (39) ERIC MCDONNELL COO 55.00 X 231,998. 0.	72 010
DIRECTOR AT LARGE 0.10 X 0. 0. (39) ERIC MCDONNELL COO	72,810.
(39) ERIC MCDONNELL coo	0.
coo 55.00 X 231,998. 0.	ļ
	39,022.
(AO) TOAN DDAIN	39,022.
SR VP FINANCE & ADMIN 55.00 X 114,217. 0.	20,761.
	20,701.
(41) STUART CANNING CHIEF DEVELOPMENT OFFICE 55.00 X 182,499.	16,145.
	10,143
CHIEF COMMUNITY INVESTMENT OFFICER 55.00 X 135,025.	24,333.
	24,333.
VP DEVELOPMENT 37.50 X 124,535.	25,800.
	23,000
SR. VP. STRATEGY & OPERATIONS 37.50 X 121,761.	7,652.
	7,002
(45) HELEN ROSEN EXECUTIVE DIRECTOR, HELPLINK 37.50 X 121,186.	22,928.
VP_ INFORMATION TECHNOLOGY 37.50 X 107,912. 0.	19,206.
VI, INICIAMITON IECINOLOGI	
Total to Part VII, Section A, line 1c 1,416,047.	248,657.

Pa	rt VII	Statement of Rever	nue		·			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	1b 1c 1d 2d		32748141.			513, or 514
Program Service Revenue	2 a b c d e f	OFFICE SPACE RE	ENTAL	Business Code 900099 900099	370,653. 20,100.	20,100.		
	g	Total. Add lines 2a-2f	• • • • • • • • • • • • • • • • • • • •	>	390,753.	,		
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties	x-exempt bond p	oroceeds	454,635.			454,635.
	6 a b	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities 4808639. 4679448.	(ii) Other				
une	d	Net gain or (loss) Gross income from fundraisir including \$3,	ng events (not		129,191.			129,191.
Other Revenue		contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fun-	e 1c). See a b					-3,369.
	b	Part IV, line 19 Less: direct expenses Net income or (loss) from gar	a)				
	10 a	and allowances Less: cost of goods sold	returns a					
	c	Net income or (loss) from sale Miscellaneous Revent		Business Code				
	11 a b c							
	e 12	• Total. Add lines 11a-11d Total revenue. See instructions.			33719351	. 390,753.	0.	580,457.

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).

	olete columns (B), (C), and (D). Check if Schedule O contains a respor	nse to any question in th	is Part IX		
	not include amounts reported on lines 6b, 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 United States. See Part IV, line 21	20,954,821.	20,954,821.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		WARRANT TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TOT		
5	Compensation of current officers, directors,				500 045
	trustees, and key employees	1,320,036.	323,781.	494,208.	502,047
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	5,816,647.	3,541,554.	1,036,420.	1,238,673
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	199,372.	199,372.		0.45 0.00
9	Other employee benefits	1,116,310.	626,603.		247,989
10	Payroll taxes	472,916.	257,406.	108,100.	107,410
11	Fees for services (non-employees):				
а	Management		water the state of		the same and the s
b	Legal	3,610.		3,610.	,,,,
С	Accounting	152,480.		152,480.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	45,316.		45,316.	
g	Other	1,049,966.	713,663.	121,695.	214,608
12	Advertising and promotion	369,028.	261,371.		77,596
13	Office expenses	525,005.	266,136.	182,873.	75 , 996
14	Information technology				
15	Royalties				
16	Occupancy	992,618.	428,104.	269,632.	294,882
17	Travel	143,451.	74,666.	33,742.	35,043
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				0.1.01.0
19	Conferences, conventions, and meetings	203,199.	153,935.	14,952.	34,312
20	Interest		1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	== 006	00 170
21	Payments to affiliates	283,343.	126,087.	75,086.	82,170
22	Depreciation, depletion, and amortization	93,561.	13,441.	79,162.	958
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d				1 400	1 500
е		9,299.		1,430.	1,583
25	Total functional expenses. Add lines 1 through 24e	33,750,978.	27,947,226.	2,890,485.	2,913,267
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here ▶ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet (A) (B) Beginning of year End of year 1,396,743. 1,687,990. 1 Cash - non-interest-bearing 1 371,455. 421,256. 2 Savings and temporary cash investments 2 9,011,340. 6,020,669. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L 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 6 employees' beneficiary organizations (see instructions) 7 7 Notes and loans receivable, net 8 Inventories for sale or use 188,354. 96,251. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,504,950. 10a basis. Complete Part VI of Schedule D 1,263,087. 157,148. 10c 241,863. b Less: accumulated depreciation 10b 14,821,418. 11,354,430. 11 11 Investments · publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 90,198. 124,710. 15 15 Other assets. See Part IV, line 11 23,294,930. 22,688,895. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 4,983,241. 9,122,827. 17 17 Accounts payable and accrued expenses 3,060,563. 3,066,489. 18 Grants payable 18 179,466. 76,914. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 8,229,196. 12,260,304. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 10,102,514. 5,249,473. 27 27 Unrestricted net assets 1,074,245. 1,290,143. 28 28 Temporarily restricted net assets 3,888,975. 3,888,975. 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 15,065,734. 10,428,591. 33 33 Total net assets or fund balances 23,294,930. 22,688,895. 34 Total liabilities and net assets/fund balances

Form	1990 (2011) UNITED WAY OF THE BAY AREA	フィーエン	12340	Pag	<u>ge 12</u>
	rt XI Reconciliation of Net Assets				
vocator vocator	Check if Schedule O contains a response to any question in this Part XI				X
1 2	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25)	1 2	33,719 33,750	,9'	78.
3	Revenue less expenses. Subtract line 2 from line 1	3	-31		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,065		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-4,605		
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	10,428	, 5	91.
Pa	rt XII Financial Statements and Reporting				77
	Check if Schedule O contains a response to any question in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir			\mathbf{x}	
	Act and OMB Circular A-133?		3a	Λ	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requor audits, explain why in Schedule O and describe any steps taken to undergo such audits.		Зь	х	
	or accito, explain with in concedic o and accombe any stope taken to ancorgo cosm additor		Form 9	90 (2	2011)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 94-1312348 INTTED WAY OF THE BAY AREA

		ONTIED	WAI OF THE D	177 171/							<u> </u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) See inst	ructions.				
he orga	anization is not a	a private foundation	because it is: (For lines	through	11, check	only one b	ox.)					
1			s, or association of chur									
2	-		'0(b)(1)(A)(ii). (Attach Sc									
з 🗀	-		tal service organization		in section	170(b)(1)	(A)(iii).					
4			operated in conjunction					(b)(1)(A)(ii	i). Enter th	e hospital	's name	€,
	city, and stat											
5			benefit of a college or ur	niversity ov	wned or op	erated by	a governr	nental uni	t describe	d in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6	A federal, sta	ate, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1	I)(A)(v).					
7 X	An organizati	ion that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general p	ublic desc	ribed in	
	section 170((b)(1)(A)(vi). (Comple	ete Part II.)									
8	٦		section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9			eives: (1) more than 33			om contri	butions, m	nembershi	p fees, and	d gross red	ceipts fr	rom
			nctions - subject to certa									
			axable income (less sect									
		509(a)(2). (Complete			·							
10	_		perated exclusively to te	st for publ	ic safety. S	See sectic	on 509(a)(4	l).				
11			perated exclusively for th						y out the p	urposes c	f one o	r
			ations described in secti									
			organization and compl									
	a Type				e III - Func		tegrated		d	Type III - 0	Other	
е			at the organization is not	controlled	directly o	r indirectly	by one or	more disc	qualified p	ersons oth	er than	
			than one or more publicly									
f			tten determination from									
·		rganization, check t										
g		-	organization accepted ar									
9			directly controls, either al								Yes	No
			upported organization?							11g(i)		
	-		n described in (i) above?									
		•	a person described in (i)							11g(iii)		
h			about the supported or								<u> </u>	
"	1 TOVIGE THE I	ollowing imorniation	about the supported of	gamzanom	(0).							
	ne of supported rganization	(ii) EIN	(iii) Type of organization (described on lines 1-9	1 1		organizat	(v) Did you notify the organization in col. (i) of your support?		the on in col. ed in the	(vii) Amount of support		
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			

Total												

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

Schedule A (Form 990 or 990-EZ) 2011

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.)

Sec	tion A. Public Support					_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	40399463.	35658988.	33822506.	31958389.	32748141.	174587487
2	Tax revenues levied for the organ-						
	ization'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	40399463.	35658988.	33822506.	31958389.	32748141.	174587487
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)						5998271.
6	Public support. Subtract line 5 from line 4.						168589216
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	40399463.	35658988.	33822506.	31958389.	32748141.	174587487
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	921,001.	452,718.	262,795.	484,408.	454,635.	2575557.
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.)	830,680.	25,236.	649,558.			1505474.
11	Total support. Add lines 7 through 10						178668518
12	Gross receipts from related activities	, etc. (see instructi	ons)				,714,285.
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and sto	p here					>
	ction C. Computation of Pub					T	04.26
	Public support percentage for 2011 (14	94.36 %
15	Public support percentage from 2010) Schedule A, Part	II, line 14			15	94.82 %
16a	33 1/3% support test - 2011. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2010. If the						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets t						
	organization meets the "facts-and-cir						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	ia, 16b, 17a, or 17			
					Sch	edule A (Form 990	or 990-EZ) 2011

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.)

Sec	ction A. Public Support						г
Cale	ndar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
Ł	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						
(Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support				•	-	T
Cale	ndar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(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.)						
	Total support (Add lines 9, 10c, 11, and 12.)			1	<u></u>	L	
14	First five years. If the Form 990 is for						
	check this box and stop here						>
Se	ction C. Computation of Publi						
15				column (f))		i i	(
16						16	
<u>Se</u>	ction D. Computation of Inves						
17	Investment income percentage for 20						
18	Investment income percentage from 2						
198	a 33 1/3% support tests - 2011. If the						
	more than 33 1/3%, check this box ar						
ŧ	33 1/3% support tests - 2010. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see is	nstructions	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Employer identification number

UNITED WAY OF THE BAY AREA 94-1312348 Organization type (check one): Section: Filers of: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** X For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

UNITED WAY OF THE BAY AREA

94-1312348

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 750,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 2,000,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

UNITED WAY OF THE BAY AREA

94-1312348

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number Name of organization 94-1312348 UNITED WAY OF THE BAY AREA Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	UNITED	WAY OF THE BAY A	REA		94-1312348
Pa	art I-A Complete if the or	ganization is exempt und	er section 501(c	e) or is a section 527 o	rganization.
2	Provide a description of the organi Political expenditures Volunteer hours			▶\$	
Pa	art I-B Complete if the or	ganization is exempt und	er section 501(c	:)(3).	
1	Enter the amount of any excise tax	k incurred by the organization unc	ler section 4955	 ▶\$	
2	Enter the amount of any excise tax	k incurred by organization manage	ers under section 495	55 ▶ \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
	art I-C Complete if the or				
	Enter the amount directly expende				
2	Enter the amount of the filing orga				
	exempt function activities				
3	Total exempt function expenditure line 17b				
4	Did the filing organization file Form				
4 5	Enter the names, addresses and e				
J	made payments. For each organiz				
	contributions received that were p				
	political action committee (PAC). If				
-	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
-					
Temperature Production					

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

Celection under section 501(h) . A Check	Schedule C (Form 990 or 990-EZ) 2011	1 11 1		- FO4/-\/O\! (!)	ad Come E760			
A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence a legislative body (direct lobbying) 1 1 4 , 500 . 1 19, 958 . 2 total lobbying expenditures (add lines 1 a and 1 b) 2 total exempt purpose expenditures (add lines 1 a and 1 b) 3 4, 458 . 3 3, 716 , 520 . 3 3, 716 , 520 . 3 3, 716 , 520 . 3 3, 716 , 520 . 3 3, 750 , 978 . 1 Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is:			mpt under section	n out (c)(3) and fill	ea Form 5/68			
expenses, and share of excess lobelying expenditures). Check If the filling organization checked box A and "limited control" provisions apply.	•			D. J. D. C. L. L. COU. L. L.		ddress FIN		
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's (totals totals (b) Affiliated group totals (a) Filing organization's (totals (b) Affiliated group totals (a) Filing organization's (totals (b) Affiliated group organization's means amounts paid or incurred.) (a) Filing organization's (totals (b) Affiliated group organization's totals (b) Affiliated group organization's (totals (b) Filing organization (totals organization (totals organization (totals organization (total) Filing organization (total) Filing organization (totals organization (total) Filing organization (totals organization (total) Filing organi				Part IV each affiliated	group member's name	e, address, EIN,		
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1 a and 1 b) c Total lobbying expenditures (add lines 1 a and 1 b) d Other exempt purpose expenditures (add lines 1 cand 1 d) d Other exempt purpose expenditures (add lines 1 cand 1 d) e Total exempt purpose expenditures (add lines 1 cand 1 d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, solumn (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 S \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S \$205,000 plus 5% of the excess over \$1,500,000. Over \$1,000,000 but not over \$1,000,000 S \$10,000,000. Over \$1,000,000 but not over \$1,000,000 S \$10,000,000. Over \$1,000,000 but not over \$1,000,000 S \$10,000,000. Over \$1,000,000 but not over \$1,000,000 S \$1,000,000. Over \$1,000,000 but not over \$1,000,000 S								
(The term "expenditures" means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7,000,000 \$175,000 plus 10% of the excess over \$1,500,000 Over \$1,500,000 but not over \$1,7,000,000 \$10,000,000 \$	B Check 🚩 🔛 if the filing organiza	tion checked box A a	nd "limited control" pro	visions apply.	(a) Filing	(b) Affiliated group		
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)								
b Total lobbying expenditures to Influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures (add lines 1c and 1d) 33,716,520 a 33,750,978 a 1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$20,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000	(The term "expend	ditures" means amo	unts paid or incurred.)		totals			
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures c Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount not line 1e, column (a) or (b) is: The lobbying nontaxable amount in line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 Over \$	1a Total lobbying expenditures to influ	Jence public opinion	(grass roots lobbying)		14,500.			
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is:								
d Other exempt purpose expenditures (add lines 1c and 1d) 33,716,520. e Total exempt purpose expenditures (add lines 1c and 1d) 33,750,978. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$1,7,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) 250,000 plus 5% of the excess over \$1,500,000. If there is an amount other than zero on either line 1h or line 1i, idd the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 4,000,000.								
e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000	• • •							
If the amount on line 1e, column (a) or (b) is:								
If the amount on line 1e, column (a) or (b) is:	f Lobbying nontaxable amount. Ente	er the amount from th	e following table in bot	h columns.	1,000,000.			
Not over \$500,000 20% of the amount on line 1e.								
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000			the amount on line 1e.					
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. g Grassroots nontaxable amount (enter 25% of line 1f) 250,000. h Subtract line 1g from line 1a. If zero or less, enter -0. i Subtract line 1f from line 1c. If zero or less, enter -0. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 4,000,000. b Lobbying ceiling amount (150% of line 2a, column(e))	Over \$500,000 but not over \$1,000	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000.				
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0· i Subtract line 1f from line 1c. If zero or less, enter -0· j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 4,000,000.	Over \$1,000,000 but not over \$1,5	00,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.				
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0· i Subtract line 1f from line 1c. If zero or less, enter -0· j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) Calendar year (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000 · 1,000,000 · 1,000,000 · 1,000,000 · 4,000,000 · 6,000,000 ·	Over \$1,500,000 but not over \$17	ss over \$1,500,000.						
h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 6,000,000.	Over \$17,000,000							
h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 6,000,000.					050 000			
i Subtract line 1g from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. b Lobbying ceiling amount (150% of line 2a, column(e))	•							
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. b Lobbying ceiling amount (150% of line 2a, column(e))	h Subtract line 1g from line 1a. If zer	o or less, enter -0-						
reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000					0.			
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 6,000,000. b Lobbying ceiling amount (150% of line 2a, column(e))	j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720	_			
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 4,000,000. b Lobbying ceiling amount (150% of line 2a, column(e))	reporting section 4911 tax for this	<u> </u>			<u>L</u>	Yes No		
Calendar year (or fiscal year beginning in) Calebbying Expenditures During 4-Year Averaging Period (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column(e))	(O				nlote all of the five			
Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2a Lobbying nontaxable amount (150% of line 2a, column(e)) 1,000,000 . 1,000,000 . 1,000,000 . 1,000,000 . 1,000,000 . 6,000,000 .								
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 2 a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column(e)) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) Total 6,000,000.								
(or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column(e)) (b) 2005 (c) 2015 (c) 2017 (d) 2017 (d) 2017 (e) 10ta 1,000,000								
2a Lobbying nontaxable amount 1,000,000. 1,000,000. 1,000,000. 1,000,000. 4,000,000. b Lobbying ceiling amount (150% of line 2a, column(e)) 6,000,000.	•	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
b Lobbying ceiling amount (150% of line 2a, column(e)) 6,000,000.	(or liscal year beginning in)							
b Lobbying ceiling amount (150% of line 2a, column(e)) 6,000,000.								
(150% of line 2a, column(e)) 6 , 000 , 000 .	2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
	b Lobbying ceiling amount					6 000 000		
298.842. 164.277. 101.675. 34.458. 599.252.	(150% of line 2a, column(e))					6,000,000.		
a Total Johnson expenditures $\begin{bmatrix} 1.98,842 & 1.94,277 & 101,079 & 34,430 & 399,232 & 101,079 & 10$		200 042	164 277	101 675	24 450	500 252		
C Total lobbying experiorities	c Total lobbying expenditures	298,842	104,2//	101,073.	34,430.	333,432.		
d Grassroots nontaxable amount 250,000. 250,000. 250,000. 250,000. 250,000.		250 000	250 000	250 000	250 000	1 000.000		
		230,000	230,000.	230,000.	230,000.	1,000,000.		
e Grassroots ceiling amount	e Grassroots celling amount (150% of line 2d, column (e))					1,500,000.		

Schedule C (Form 990 or 990-EZ) 2011

55,489.

14,500.

1,759.

1,759.

37,471.

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011 UNITED WAY OF THE BAY AREA 94-131234 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)		
of th	e lobbying activity.	Yes	No	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
	Total. Add lines 1c through 1i					
•	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b c	If "Yes," enter the amount of any tax incurred under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	F04/-V	(F)			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	Yes	No	
				162	INO	
1	Were substantially all (90% or more) dues received nondeductible by members?				-	
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		<u> </u>	iIII-A, lin	ie 3, is	
1	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1			
2	expenses for which the section 527(f) tax was paid). Current year		2a			
	Carryover from last year				***************************************	
	Total		1			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		5			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex					
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	political	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pai	T IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P part for any additional information.	art II-A; and	Part II-B, li	ne 1. Also,	complete	

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ► See separate instructions.

2011
Open to Public Inspection

Name of the organization

UNITED WAY OF THE BAY AREA

Employer identification number 94-1312348

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	46	0
2	Aggregate contributions to (during year)	2,228,072.	0.
3	Aggregate grants from (during year)	2,157,709.	0.
4	Aggregate value at end of year	748,720.	0.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi-	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		E000000003
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
^	and section 170(h)(4)(B)(ii)?		
9	include, if applicable, the text of the footnote to the organization		
		ation's infancial statements that describes	the organization's accounting for
Pai	conservation easements. TIII Organizations Maintaining Collections o	of Art. Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descr		,
h	If the organization elected, as permitted under SFAS 116 (AS		at and balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, e		
	relating to these items:		,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		. .
2	If the organization received or held works of art, historical tree		
_	the following amounts required to be reported under SFAS 1		- ··
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		L .

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

Schedule D (Form 990) 2011

Part I	(3) (1) (1) (1) (1) (1) (1) (1)	ollections of Ar		easures, o	r Othe	er Simil	ar Asse	ts (cont	inued)
	sing the organization's acquisition, accession									
	heck all that apply):	,	,,			Ŭ				
a [Public exhibition	d	Loan or exc	hange prograi	ms					
b	Scholarly research	e		3 , 3						
c	Preservation for future generations	-								
	rovide a description of the organization's co	llections and explain	how they further th	ne organizatio	n's exe	arua tam	ose in Par	t XIV.		
	uring the year, did the organization solicit or									
	be sold to raise funds rather than to be ma							Yes		No
	V Escrow and Custodial Arrang							ine 9, or		
(01.000-01.00-00.0	reported an amount on Form 990, Par		. . .							
1a le	the organization an agent, trustee, custodia		arv for contribution	s or other ass	ets not	included				
	Form 990, Part X?							Yes	X	No
	"Yes," explain the arrangement in Part XIV									
2	100, Oxplain the arrangement in Farther							Amoun	t	
c Br	eginning balance					. 1c				
	dditions during the year									
	istributions during the year									
	nding balance									
	id the organization include an amount on Fo							Yes	X	No
	"Yes," explain the arrangement in Part XIV.	.,,,,,,,,,								
Part \	7000000	the organization ans	swered "Yes" to Fo	rm 990, Part I	V, line 1	0.				
100000000000000000000000000000000000000		(a) Current year	(b) Prior year	(c) Two years			years back	(e) Fou	r years	back
1a Be	eginning of year balance	4,687,566.	4,049,390.				106,300.			
	ontributions		13,344.		1					
	et investment earnings, gains, and losses	115,298.	154,089.		,875.	-1	142,189.			
	rants or scholarships									
	ther expenditures for facilities									
	nd programs	457,392.	-470,743.	-257	799.		500,395.			
	dministrative expenses									
	nd of year balance	4,345,472.	4,687,566.	4,049	390.	3 7	763,716.			
_	rovide the estimated percentage of the curr				1			Lancaran		
	oard designated or quasi-endowment	• 00	%	,,,						
	ermanent endowment >89.49	%								
c T	emporarily restricted endowment > 10									
	ne percentages in lines 2a, 2b, and 2c shou									
	re there endowment funds not in the posse		tion that are held a	nd administer	ed for t	he oraani	zation			
by		oolon or the organiza	mon mar and more a	,,,,					Yes	No
(i)								3a(i)		X
(ii								3a(ii)		Х
	"Yes" to 3a(ii), are the related organizations									
	escribe in Part XIV the intended uses of the							· L		4
Part \										
	Description of property	(a) Cost or ot		or other	(c) A	ccumulat	ed	(d) Boo	k valu	е
	Becomption of property	basis (investm		(other)	٠,,	preciation	1	• •		
12 1	and		-	·						
	uildings			f						
	easehold improvements		4	8,736.	***************************************	20,8	70.	2	7,8	66.
	quipment			5,581.		486,2				96.
	ther			0,633.		755,9				01.
	add lines 1a through 1e. (Column (d) must e						>			63.

Schedule D (Form 990) 2011

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	(c) Method of valuation: Cost or end-of-year market value
(1) Fina	ancial derivatives			
(2) Clo	sely-held equity interests	•		
(3) Oth	er			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (H)		A CONTRACTOR OF THE CONTRACTOR		
(l)				
	col (b) must equal Form 990, Part X, col (B) line 12.)			
	VIII Investments - Program Related.		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)	A A A A A A A A A A A A A A A A A A A			
(7)				
(8)				
(9)				
(10)	000 D AV (1/D) 5 - 40 \			
Part	Col (b) must equal Form 990, Part X, col (B) line 13.) Other Assets. See Form 990, Part X, line 13.)			
ran	CONTRACTOR	a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		
(7)				
(8)				
(9)				
(10)				
	Column (b) must equal Form 990, Part X, col (B) I			>
Part		X, line 25.		- F
1.	(a) Description of liability		(b) Book value	_
(1)	Federal income taxes			_
(2)				\dashv
(3)				-
(4)				\dashv
(5)				+
(6)				-
(7)				-
(8)				-
(9)				\dashv
(10)				\dashv
(11)	Column (b) must squal Form 000 Port V and (D)	ino 25.)		\dashv
rotal.	Column (b) must equal Form 990, Part X, col (B) I	e to the organization's financial sta	tements that reports the ord	panization's liability for uncertain tax positions under

FIN 48 (ASC 740). 32053

Sche	dule D (Form 990) 2011 UNITED WAY OF THE BAY AREA				1312348	Page 4
Pai	TXI Reconciliation of Change in Net Assets from Form 990 to	<u>Audit</u>	ed Financial Sta	temen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		33,719,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		33,750	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			,627.
4	Net unrealized gains (losses) on investments		4		-541	<u>,334.</u>
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8		-4,064	
9	Total adjustments (net). Add lines 4 through 8		9	·	-4,605	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10		-4,637	<u>,143.</u>
Pa	t XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Revenue per	Retur	n	
1	Total revenue, gains, and other support per audited financial statements			. 1	11,034	<u>,010.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	-541 , 334			
b	Donated services and use of facilities	2b	754,443	3.		
c	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d	-4,064,182	<u>? •</u>		
е	Add lines 2a through 2d			. 2e	-3,851	
3	Subtract line 2e from line 1			. 3	14,885	,083.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b		45,316			
b	Other (Describe in Part XIV.)		18,788,952	?.		
С	Add lines 4a and 4b			. 4c	18,834	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	33,719	,351.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses p	er Retu	urn	
1	Total expenses and losses per audited financial statements				15,671	,153.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	754 , 443	3.		
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d	25,080).		
е	Add lines 2a through 2d			. 2e	779	,523.
3	Subtract line 2e from line 1			1	14,891	,630.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	45,316			
b	Other (Describe in Part XIV.)	4b	18,814,032	2.		
	Add lines 4a and 4b				18,859	,348.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				33,750	,978.
-	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	, lines 1	la and 4; Part IV, lines	s 1b and	2b; Part V, line	4; Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	lete this	s part to provide any	additiona	al information.	
PAI	RT V, LINE 4: ENDOWMENTS ARE USED FOR TEMPO	RAR	ILY AND UNI	RESTR	ICTED	

PURPOSES ACCORDING TO THE INTENT OF THE DONOR.

PART X, LINE 2: UWBA ADOPTED THE PROVISIONS OF FASB ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, RELATING TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS ON JULY 1, 2009. UWBA EVALUATES UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH ACCOUNTING FOR CONTINGENCIES WHEREBY THE EFFECT OF THE UNCERTAINTY WOULD BE RECORDED IF THE OUTCOME WAS CONSIDERED Schedule D (Form 990) 2011

132054 01-23-12

Confedence of Form Coop 2011	4-1312348 Page 5
Part XIV Supplemental Information (continued)	
PROBABLE AND REASONABLY ESTIMABLE. UWBA HAD NO UNRECOGNIZED TO	AX BENEFITS
AT JUNE 30, 2012 OR 2011. UWBA FILES EXEMPT ORGANIZATION RETU	RNS IN THE
U.S. FEDERAL AND CALIFORNIA JURISDICTIONS. WITH FEW EXCEPTIONS	S, UWBA IS NO
LONGER SUBJECT TO UNITED STATES FEDERAL OR STATE/LOCAL INCOME	TAX
EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS BEFORE 2007.	
PART XI, LINE 8 - OTHER ADJUSTMENTS:	
CHANGE IN PENSION LIABILITY IN EXCESS OF INTANGIBLE PENSION	
ASSETS	-4,064,182.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN PENSION LIABILITY IN EXCESS OF INTANGIBLE PENSION	
ASSETS	-4,064,182.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATED PLEDGES	18,793,932.
RENTAL INCOME RECLASSIFIED FROM EXPENSES TO REVENUE	20,100.
FUNDRAISING EXPENSES RECLASSIFIED FROM EXPENSES TO REVENUE	-25,080.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	18,788,952.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES RECLASSIFIED FROM EXPENSES TO REVENUE	25,080.
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATED PLEDGES	18,793,932.
RENTAL INCOME RECLASSIFIED FROM EXPENSES TO REVENUE	20,100.
TOTAL TO SCHEDULE D, PART XIII, LINE 4B	18,814,032.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

UNITED	WAY OF THE BAY ARE	ľΑ			94-1312	348
Part I Fundraising Activities required to complete this par	. Complete if the organization answ t.	ered "\	es" to	o Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicita f Solicita g Special or oral agreement with any individua art VII) or entity in connection with prividuals or entities (fundraisers) pure	tion of tion of fundra I (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees orYes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have c	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit				d it is exempt from re	egistration
					wanta water variety of the state of the stat	

 $\label{eq:LHA} \ \, \text{Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.}$

Schedule G (Form 990 or 990-EZ) 2011

94-1312348 Page 2 Schedule G (Form 990 or 990-EZ) 2011 UNITED WAY OF THE BAY AREA Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE LIGHT THE (add col. (a) through SPARK col. (c)) (total number) (event type) (event type) 25,437. 25,437. 1 Gross receipts 3,726. 3,726. 2 Less: Charitable contributions 21,711. 21,711. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses 1,000. Rent/facility costs 1,000. 16,641. 16,641. 7 Food and beverages 887. 887. 8 Entertainment 6,552. 6,552. 9 Other direct expenses _____ 25,080, 10 Direct expense summary. Add lines 4 through 9 in column (d) -3,369.11 Net income summary. Combine line 3, column (d), and line 10. Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming Revenue (a) Bingo col. (a) through col. (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Schedule G (Form 990 or 990-EZ) 2011

b If "Yes," explain:

Sch	edule G (Form 990 or 990-EZ) 2011 UNITED WAY OF THE BAY AREA 94-	<u> 1312</u>	<u>348</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	الل	Yes	No
13	Indicate the percentage of gaming activity operated in:			
a	The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
t	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party > \$			
C	s If "Yes," enter name and address of the third party:			
	Name ▶			
	Address			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No
ŧ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year ▶ \$			
Pε	Irt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (ii) and (\	/), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see	instruc	tions).

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

OMB No 1545-0047

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

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

CIVID INC. 1343-0047	2011	Open to Public Inspection

Employer identification number **№** 94-1312348 5 F DESIGNATED BY DONOR TO ဥ 잂 욘 ဥ (h) Purpose of grant or assistance DESIGNATED BY DONOR AGENCY FOR GENERAL X Yes 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 OPERATIONS OPERATIONS OPERATIONS OPERATIONS OPERATIONS DPERATIONS 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 ame and address of organization

(a) Amount of organization

(b) EIN

(c) IRC section if applicable cash grant assistance or government assistance or government assistance or government assistance other) 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 ٥. Ö ö ö ö ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 580 343. 7,381, 9,256 10,000 12,242 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Ŋ 10 UNITED WAY OF THE BAY AREA 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 942897949 General Information on Grants and Assistance 943296338 942960297 943087060 131635264 943111738 criteria used to award the grants or assistance? ALAMEDA COUNTY COMMUNITY FOOD BANK 1 (a) Name and address of organization ALZHEIMERS ASSOCIATION NORTHERN 1663 MISSION STREET, STE 500 2030 HARRISON STREET, 3RD FL 2504 BROADWAY AT 93RD STREET INC - 7900 EDGEWATER DRIVE AIDS LEGAL REFERRAL PANEL AIM HIGH FOR HIGH SCHOOL SAN FRANCISCO, CA 94103 40849 FREMONT BOULEVARD SAN FRANCISCO, CA 94141 MOUNTAIN VIEW, CA 94043 ADVENT LUTHERAN CHURCH 1060 LA AVENIDA STREET Name of the organization NEW YORK, NY 10025 OAKLAND, CA 94621 FREMONT, CA 94538 ABODE SERVICES Parti Partil 8

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

Page 1

Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) UNITED WAY OF THE BAY AREA

Fact iii Continuation of Grants and Other Assistance to Governments	Assistance to G		ilzations in the or	וופח סומובא (ספום	and Organizations in the Officed States (Schedule 1 (1 OH) 990), 1 dit ii.)	(11.)	
(a) Name and address of organization or government	(p) 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
AMERICAN CANCER SOCIETY, INC. CALIFORNIA - 601 MONTGOMERY STREET, SUITE 650 - SAN FRANCISCO, CA 94111	941170350	501(C)(3)	29,365.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AMERICAN HEART ASSOCIATION 100 MONTGOMERY STREET #1650 SAN FRANCISCO, CA 94104	135613797	501(C)(3)	21,389.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
6 0	946131367	501(0)(3)	10,000,	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
1 8 8 5	943045430	501(C)(3)	77,538.	,0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ARC OF SAN FRANCISCO 1500 HOWARD STREET SAN FRANCISCO CA 94103	941415287	501(C)(3)	13,959.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ASIAN HEALTH SERVICES 818 WEBSTER STREET OAKLAND CA 94607	942235908	501(C)(3)	6,679,	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ASSOCIATED PARENT CLUBS OF PIEDMONT - 760 MAGNOLIA AVENUE - OAKLAND, CA 94611	942960998	501(C)(3)	12,300.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AVALON ACADEMY 818 MAHLER ROAD BURLINGAME, CA 94010	201651912	501(C)(3)	11,840.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAR ASSOCIATION OF SAN FRANCISCO 301 BATTERY STREET, THIRD FLOOR SAN FRANCISCO, CA 94111	943049980	501(C)(3)	6,450.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
							The man of the characters

Schedule I (Form 990)

(a) Name and address of cash grant of organization or government if applicable cash grant	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant) <u> </u>	(f) Method of leaves assistance (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARNES FOUNDATION 230 NORTH 21ST STREET, 1ST FLOOR EAPHLADELPHIA, PA 19103	236000149	S01(C)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA COUNCIL FOUNDATION 201 CALIFORNIA STREET, SUITE 1450 SAN FRANCISCO, CA 94111	201826827	501(c)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA DISCOVERY MUSEUM 557 MCREYNOLDS ROAD SAUSALITO, CA 94965	680033227	501(c)(3)	20,500.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA LEGAL AID 1035 MARKET STREET, 6TH FLOOR SAN FRANCISCO, CA 94103	941631316	501(c)(3)	14,450.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY AREA WOMEN'S & CHILDREN'S CENTER - 318 LEAVENWORTH STREET - SAN FRANCISCO, CA 94102	942722718	501(0)(3)	5,442.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BAY OAKS SOCCER CLUB 5940 COLLEGE AVENUE, SUITE C OAKLAND, CA 94618	200489332	501(C)(3)	5,250.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BENICIA COMMUNITY ACTION COUNCIL 480 MILITARY EAST BENICIA, CA 94510	680294153	501(C)(3)	5,789.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BENICIA EDUCATION FOUNDATION PO BOX 1611 BENICIA, CA 94510	680173278	501(C)(3)	*866'9	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BERKELEY REPERTORY THEATRE 999 HARRISON STREET BERKELEY, CA 94710	941679756	501(C)(3)	9,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Schedule I (Form 990)

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Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) UNITED WAY OF THE BAY AREA

(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
BIG BROTHERS/SISTERS OF THE BAY AREA - 649 MISSION STREET, 5TH FLOOR - SAN FRANCISCO, CA 94105	942897683	501(C)(3)	8,923.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BLIND BABIES FOUNDATION 1814 FRANKLIN ST, 11TH FLOOR OAKLAND, CA 94612	941156630	501(C)(3)	5,600.	• 0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOSTON COLLEGE 140 COMMONWEALTH AVENUE,MORE HALL E CHESTNUT HILL, MA 02467	k 042103545	501(C)(3)	11,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOY SCOUTS MARIN COUNCIL 225 WEST END AVE. SAN RAFAEL, CA 94901	941156323	501(C)(3)	5,220.	,0		;	DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS & GIRLS CLUB MARTINEZ/RODEO 1301 ALHAMBRA AVENUE MARTINEZ, CA 94553	941333618	501(C)(3)	5,184.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
RLS RNE ISCC	941156608	501(C)(3)	22,824.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS & GIRLS CLUBS OF AMERICA 5 HANOVER SQUARE, 3RD FLOOR NEW YORK, NY 10005	135562976	501(C)(3)	15,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BOYS AND GIRLS HARBOR ONE EAST 104TH STREET, ROOM 544 NEW YORK, NY 10029	136015256	501(C)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BRANSON SCHOOL 39 FERNHILL AVENUE ROSS, CA 94957	940338330	501(C)(3)	8,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990)

Schedule I (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) UNITED WAY OF THE BAY AREA

raft if Continuation of Grants and Other Assistance to Governments a	Assistance to de		ing Organizations in the Officer States (Sch		saute 1 (1 01111 330), 1 at 11.	(111.)	
(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
BREAKTHROUGH COLLABORATIVE 545 SANSOME STREET, SUITE 700 SAN FRANCISCO, CA 94111	943140620	501(C)(3)	40,200.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
BUILDON PO BOX 16741 STAMFORD, CT 06905	223128648	501(C)(3)	,000,9	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CABRILLO EDUCATION FOUNDATION PO BOX 354 HALF MOON BAY, CA 94019	942976402	501(C)(3)	.000,05	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALGUNS FOUNDATION 3200 BRIDGE PARKWAY, SUITE 202C REDWOOD CITY, CA 94065	262794094	501(C)(3)	8,823.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
1 24 0	943256781	501(C)(3)	13,225.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ORWA EET, CA 9	26056540	501(C)(3)	10,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALVARY PRESBYTERIAN CHURCH 2515 FILLMORE SAN FRANCISCO, CA 94115	941337635	501(C)(3)	11,050.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CALVARY TEMPLE CHURCH CONCORD 4725 EVORA RD CONCORD, CA 94520	941598217	501(C)(3)	6,647.	•0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CAMP AUGUSTA 17530 LAKE VERA ROAD NEVADA CITY, CA 95959	941265033	501(C)(3)	.000,01	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990) UNITED WAY OF THE BAY AREA Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CAMP TAYLOR 5424 PIRRONE ROAD SALIDA, CA 95368	043709177	501(C)(3)	12,407.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CANAL ALLIANCE 91 LARKSPUR STREET SAN RAFAEL, CA 94901	942832648	501(C)(3)	.000,9	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHEDRAL SCHOOL FOR BOYS 1275 SACRAMENTO ST SAN FRANCISCO, CA 94108	941156846	501(C)(3)	21,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHOLIC CHARITIES CYO SF ARCHDIOCESE - 180 HOWARD STREET, SUITE 100 - SAN FRANCISCO, CA 94105	941498472	501(C)(3)	12,163.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CATHOLIC CHARITIES OF THE EAST BAY 433 JEFFERSON STREET OAKLAND, CA 94607	942677202	501(c)(3)	38,835.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDREN NOW 1212 BROADWAY #530 OAKLAND, CA 94612	943059243	501(C)(3)	.000,	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDRENS DISCOVERY MUSEUM OF SAN JOSE - 180 WOZ WAY - SAN JOSE, CA 95110	942870828	501(C)(3)	11,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHILDRENS HOSPITAL & RESEARCH CENTER FDN - 2201 BROADWAY, SUITE 600 - OAKLAND, CA 94612	941657474	501(C)(3)	11,828.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHINESE HOSPITAL 845 JACKSON ST SAN FRANCISCO, CA 94133	940382780	501(C)(3)	5,978.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Schedule I (Form 990)
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Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) UNITED WAY OF THE BAY AREA

(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
CHRONICLE SEASON OF SHARING FUND 901 MISSION STREET SAN FRANCISCO, CA 94144	943019992	501(C)(3)	.000,35	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CHURCH OF JESUS CHRIST LDS 50 E NORTH TEMPLE STREET SALT LAKE CITY, UT 84150	237300405	501(C)(3)	17,615.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CITY TEAM MINISTRIES OF OAKLAND 722 WASHINGTON STREET OAKLAND, CA 94607	941501265	501(C)(3)	5,100.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CITY TEAM MINISTRIES OF SAN FRANCISCO - 164 6TH STREET - SAN FRANCISCO, CA 94103	510163302	501(C)(3)	7,800.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COLLEGE PREPARATORY SCHOOL OAKLAND 6100 BROADWAY	941492272	501(C)(3)	6,750.	°			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COMMITTEE FOR ECONOMIC DEVELOPMENT 2000 L STREET, N.W., SUITE 700 WASHINGTON, DC 20036	131623973	501(0)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
E EI	311705370	501(C)(3)	10,075.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COMMONWEALTH CLUB OF CALIFORNIA 595 MARKET STREET, 2ND FLOOR SAN FRANCISCO, CA 94105	940399260	501(C)(3)	14,850.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
COMPASS FAMILY SERVICES 49 POWELL STREET, 3RD FLOOR SAN FRANCISCO, CA 94102	941156622	501(C)(3)	24,691.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Schodule Hearm 990)

Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) UNITED WAY OF THE BAY AREA

(a) Name and address of organization or government	(p) 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
CONSERVATION CORPS NORTH BAY 27 LARKSPUR ST SAN RAFAEL, CA 94901	942831592	501(C)(3)	7,500.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CORNELL UNIVERSITY 55 BROWN ROAD ITHACA, NY 14850	150532082	501(C)(3)	7,100.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CORNERSTONE FELLOWSHIP 348 W CANYONS PKWY LIVERMORE, CA 94551	943178882	501(C)(3)	19,487.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
CREEKSIDE OPEN BIBLE CHURCH 444 FIG TREE LANE MARTINEZ, CA 94553	942541096	501(C)(3)	9,390.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	043391621	501(C)(3)	5,450.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DE LA SALLE HIGH SCHOOL 1130 WINTON DR (DEVELPMNT OFC) CONCORD, CA 94518	680311262	501(C)(3)	17,081.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DIABETIC YOUTH FOUNDATION 5167 CLAYTON ROAD, STE F CONCORD, CA 94521	946003673	501(C)(3)	7,140.	• 0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DOCTORS WITHOUT BORDERS HEADQUARTER - 333 7TH AVENUE, 2ND FLOOR - NEW YORK, NY 10016	133433452	501(C)(3)	13,404.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
DOMINICAN UNIVERSITY OF CALIFORNIA 50 ACACIA AVENUE SAN RAFAEL, CA 94901	941156525	501(C)(3)	13,250.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.)

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(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
EAST BAY COMMUNITY LAW CENTER 2921 ADELINE STREET BERKELEY, CA 94703	943042565	501(C)(3)	7,706.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SPCA SWIN CA 9	941322202	501(C)(3)	5,002.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EAST OAKLAND YOUTH DEVELOPMENT CENTER - 8200 INTERNATIONAL BLVD OAKLAND, CA 94621	237334590	501(C)(3)	10,460.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
EDUCATIONAL FOUNDATION OF ORINDA 21 'C' ORINDA WAY #123 ORINDA. CA 94563	942623617	501(C)(3)	19,606.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ATORI KON S	941696494	501(C)(3)	7,200.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FAMILIES HELPING FAMILIES 3101 BUSCH DRIVE FAIRFIELD, CA 94535	680148410	501(C)(3)	14,110.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FESCO-FAMILY EMERGENCY SHELTER COALITION - 21455 BIRCH STREET, SUITE 5 - HAYWARD, CA 94541	943029991	501(C)(3)	7,131.	° o			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FIRST CONGREGATIONAL CHURCH OF SAN JOSE - 1980 HAMILTON AVENUE - SAN JOSE, CA 95125	N 941170420	501(C)(3)	10,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FIRST COVENANT CHURCH 4000 REDWOOD ROAD OAKLAND, CA 94619		501(C)(3)	11,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

Schedule I (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) UNITED WAY OF THE BAY AREA

(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
FIRST PLACE FOR YOUTH 519 - 17TH STREET, SUITE 600 OAKLAND, CA 94612	943341034	501(C)(3)	.008,2	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FIRST PRESBYTERIAN CHURCH OF CONCORD - 1965 COLFAX ST - CONCORD, CA 94520	941510160	501(C)(3)	13,650.	o			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FLORIDA STATE UNIVERSITY FOUNDATION - 2010 LEVY AVENUE, BLDG B STE 300 - TALLAHASSEE, FL 32306	596152180	501(C)(3)	8,000	0,0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FOOD BANK OF CONTRA COSTA AND SOLANO - 4010 NELSON AVENUE - CONCORD, CA 94520	942418054	501(C)(3)	105,237.	°°			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FOUNDATION FOR THE FUTURE 555 MIDDLEFIELD AVE ATHERTON, CA 94027	943181333	501(C)(3)	.000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
FRIENDS OF SAN FRANCISCO ANIMAL CARE - 1200 15TH STREET - SAN FRANCISCO, CA 94103	943371620	501(C)(3)	6,100.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
GIRLS INC OF ALAMEDA COUNTY 13666 EAST 14TH STREET SAN LEANDRO, CA 94578	941558073	501(C)(3)	.990/9	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
GIRLS ON THE RUN OF THE BAY AREA 3543 18TH STREET #31 SAN FRANCISCO, CA 94110	710890558	501(C)(3)	5,489.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
GLADWYNE MONTESSORI SCHOOL 920 YOUNGSFORD ROAD GLADWYNE, PA 19035	231628684	501(C)(3)	.000,00	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

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Schedule I (Form 990)	Part II Continuation of

(a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section organization or government (d) Amount of (e) Amount of (f) Method of (f	(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
GLAUCOMA RESEARCH FOUNDATION 251 POST STREET #600 SAN FRANCISCO, CA 94108	942495035	501(C)(3)	6,100.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HAAS SCHOOL OF BUSINESS 2080 ADDISON STREET #4200 BERKELEY, CA 94720	946002123	501(C)(3)	15,100.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HABITAT FOR HUMANITY EAST BAY 2619 BROADWAY #205 OAKLAND, CA 94612	943053687	501(C)(3)	21,127.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HALF MOON BAY HIGH SCHOOL LEWIS FOSTER DRIVE HALF MOON BAY, CA 94019		CABRILLO UNIFIED	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HAMILTON FAMILY CENTER 1631 HAYES STREET SAN FRANCISCO, CA 94117	943055602	501(C)(3)	5,152.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HAMLIN SCHOOL 2120 BROADWAY SAN FRANCISCO, CA 94115	941393894	501(C)(3)	9,400.	o			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HARVARD BUSINESS SCHOOL TEELE HALL, SOLDIERS FIELD BOSTON, MA 02163	042103580	501(C)(3)	15,500.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HARVARD UNIVERSITY 124 MT AUBURN STREET CAMBRIDGE, MA 02138	530199180	501(c)(3)	23,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
HILLSBOROUGH SCHOOLS FOUNDATION 300 EL CERRITO HILLSBOROUGH, CA 94010	942403888	501(¢)(3)	12,600.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Cohodul (Form Officery)
							Schedule I (Form 990)

(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
HUNTER COLLEGE HIGH SCHOOL 695 PARK AVENUE, BOX 373 NEW YORK, NY 10021	133953396	501(c)(3)	6,500.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
IMMIGRANT LEGAL RESOURCE CENTER 1663 MISSION ST #602 SAN FRANCISCO, CA 94103	942939540	501(C)(3)	6,583.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JENNYS LIGHT 5021 VERNON AVENUE, SUITE 107 MINNEAPOLIS, MN 55436	261909216	501(c)(3)	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JEWISH COMMUNITY CENTER OF SAN FRANCISCO - 3200 CALIFORNIA STREET - SAN FRANCISCO, CA 94118	943227260	501(c)(3)	10,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JEWISH COMMUNITY FEDERATION 121 STEUART STREET, 7TH FLOOR SAN FRANCISCO, CA 94105	941156533	501(C)(3)	5,238.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JEWISH FAMILY & CHILDRENS SERVICES 2150 POST STREET SAN FRANCISCO, CA 94115	941156528	501(C)(3)	19,420.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JUNIOR ACHIEVEMENT NORTHERN CALIFORNIA - 3003 OAK ROAD, SUITE 109 - WALNUT CREEK, CA 94597	941322179	501(C)(3)	11,125.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
JUVENILE DIABETES RESEARCH FOUNDATION - 49 STEVENSON STREET, STE 1200 - SAN PRANCISCO, CA 94105	231907729	S01(C)(3)	6,087.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
KEEN SAN FRANCISCO PO BOX 223 GUALALA, CA 95445	521767631	501(C)(3)	9,050.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
							Schedule I (Form 990)

Schedule I (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(p) 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
KENTFIELD SCHOOL FOUNDATION 750 COLLEGE AVENUE KENTFIELD, CA 94904	942665683	501(C)(3)	9,500.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
KIPP BAY AREA SCHOOLS 426 17TH STREET, STE 200 OAKLAND, CA 94612	205010766	501(c)(3)	19,675.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
KIPP FOUNDATION 135 MAIN STREET, SUITE 1700 SAN FRANCISCO, CA 94105	943362724	501(C)(3)	9,355.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
KQED INC 2601 MARIPOSA ST SAN FRANCISCO, CA 94110	941241309	501(C)(3)	10,551.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LA CASA DE LAS MADRES 1663 MISSION STREET, SUITE 225 SAN FRANCISCO, CA 94103	942330864	501(C)(3)	19,540.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LARKIN STREET YOUTH SERVICES 1138 SUTTER STREET SAN FRANCISCO, CA 94109	942917999	501(C)(3)	31,997.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LAWYERS COMMITTEE FOR CIVIL RIGHTS- SF - 131 STEUART ST, STE 400 - SAN FRANCISCO, CA 94105	942581415	501(C)(3)	12,650.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LEGAL AID SOCIETY- EMPLOYMENT LAW CENTER - 180 MONTGOMERY STREET, SUITE 600 - SAN FRANCISCO, CA 94104	942783401	501(c)(3)	26,830.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
LOAVES & FISHES OF CONTRA COSTA 1985 BONFACIO ST., SUITE 100 CONCORD, CA 94520	680018077	501(C)(3)	9,209.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

(a) Name and address of coganization or government of coganization or government (book, FMV, assistance appraisal, other)	(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
MAKE A WISH FOUNDATION GREATER BAY AREA - 55 HAWTHORNE STREET, SUITE 800 - SAN FRANCISCO, CA 94105	942958481	501(C)(3)	13,613.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MARIN BRAIN INJURY NETWORK 1132 MAGNOLIA AVENUE LARKSPUR, CA 94939	680105213	501(C)(3)	5,120.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MEALS ON WHEELS OF SAN FRANCISCO 1375 FAIRFAX AVENUE SAN FRANCISCO, CA 94124	941741155	501(C)(3)	5,490.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MEDIA MATTERS 455 MASSACHUSETTS AVENUE NW, SUITE WASHINGTON, DC 20001	470928008	501(C)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MENLO PARK ATHERTON EDUCATION FDN PO BOX 584 MENLO PARK, CA 94026	942871701	501(C)(3)	.000,01	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MENLO PARK PRESBYTERIAN CHURCH 950 SANTA CRUZ AVE. MENLO PARK, CA 94025	941167435	501(C)(3)	13,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MISSION SOLANO RESCUE MISSION 740 E TRAVIS BLVD FAIRFIELD, CA 94533	611431375	501(C)(3)	13,929.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
MORAGA EDUCATIONAL FOUNDATION PO BOX 34 MORAGA, CA 94556	942791659	501(C)(3)	24,325.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
NATURAL RESOURCES DEFENSE COUNCIL 111 SUTTER STREET, FLOOR 20 SAN FRANCISCO, CA 94104	132654926	501(C)(3)	5,500.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
							Schedule I (Form 990)

Schedule I (Form 990) UNITED WAY OF THE BAY AREA
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) UNITED WAY OF THE BAY AREA

Continuation of drains and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 99U), Part II.	Assistance to de	overnments and Orga	nizations in the Ur	ited States (Sche	dule I (Form 99U), Par	(·II.)	
(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
NEW AMERICA FOUNDATION 921 11TH STREET, SUITE 901 SACRAMENTO, CA 95814	522096845	501(C)(3)	25,000.	0,			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
NEW LEADERS COUNCIL 8837 VILLA LA JOLLA ROAD, #13465 LA JOLLA, CA 92039	562581640	501(C)(3)	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
NEW SCHOOLS VENTURE FUND 49 STEVENSON, SUITE 575 SAN FRANCISCO, CA 94105	943281780	501(C)(3)	25,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
OAKLAND MUSEUM OF CALIFORNIA FOUNDATION - 1000 OAK STREET, DEVELOPMENT - OAKLAND, CA 94607	943094513	501(C)(3)	.000,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
OLANA PARTNERSHIP PO BOX 199 HUDSON, NY 12534	141828430	501(C)(3)	100,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
OMEGA BOYS CLUB 1060 TENNESSEE STEET SAN FRANCISCO, CA 94107	943171846	501(C)(3)	6,624.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ON LOK SENIOR HEALTH SERVICES 1333 BUSH STREET SAN FRANCISCO, CA 94109	942162549	501(C)(3)	23,206.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
OPPORTUNITY INTERNATIONAL 2122 YORK RD STE 150 OAK BROOK, IL 60523	540907624	501(C)(3)	15,000.	o			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ORINDA BASEBALL ASSOCIATION PO BOX 1822 ORINDA, CA 94563	943016824	501(C)(3)	10,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
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Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.)

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OXFAM AMERICA 226 CAUSEWAY STREET, 5TH FLOOR BOSTON, MA 02114 2370	237069110 5	501(C)(3)	8,831.	Ö			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PENNSYLVANIA ACADEMY OF FINE ARTS 128 N BROAD STREET PHILADELPHIA, PA 19102 2313	231352256 5	501(C)(3)	16,500.	°			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PHILADELPHIA MUSEUM OF ART 26TH & BEN FRANKLIN PKWY PHILADELPHIA, PA 19130 2313	231365388 5	501(C)(3)	25,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PHILIPPINE INTERNATIONAL AID 5226 DIAMOND HEIGHTS BLVD SAN FRANCISCO, CA 94131	943008383 5	501(C)(3)	12,229.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PHYSICIANS COMMITTEE FOR 5100 WISCONSIN AVE NW STE 400 WASHINGTON, DC 20016 5213	521394893 5	501(C)(3)	.090,6	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
PIEDMONT RECREATIONAL FACILITIES ORG 111 HILLSIDE AVENUE - PIEDMONT, CA 94611	263671348 5	501(C)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
POINTS OF LIGHT INSTITUTE 600 MEANS STREET, SUITE 210 ATLANTA, GA 30318 6502	650206641 5	501(C)(3)	.000,03	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
POMONA COLLEGE-OFFICE OF ANNUAL GIVING - 550 N. COLLEGE WAY, ROOM 245 - CLAREMONT, CA 91711	951664112 5	501(C)(3)	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
RAPHAEL HOUSE OF SAN FRANCISCO 1065 SUTTER STREET SAN FRANCISCO, CA 94109 9431	943141608 5	501(C)(3)	11,749.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Schedule I (Form 990)

(a) Name and address of organization or government	(p) 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
REDWOOD DAY SCHOOL 3245 SHEFFIELD AVE OAKLAND, CA 94602	942289521	501(C)(3)	6,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ROBERT A TOIGO FOUNDATION 180 GRAND AVENUE, SUITE 450 OAKLAND, CA 94612	133565420	501(c)(3)	5,400.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SACRED HEART SCHOOLS 150 VALPARAISO ATHERTON, CA 94027	941170355	501(c)(3)	62,815.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SALVATION ARMY NATIONAL CORP PO BOX 269 ALEXANDRIA, VA 22313	222406433	501(C)(3)	10,086.	0.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SALVATION ARMY-EAST BAY & MARIN COUNTY - PO BOX 348000 - SACRAMENTO, CA 95834	941156347	501(C)(3)	5,400.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO BALLET ASSSOCIATION 455 FRANKLIN STREET SAN FRANCISCO, CA 94102	941415298	501(C)(3)	15,400,	0.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94107	943041517	501(C)(3)	40,822.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO GIRLS CHORUS 44 PAGE STREET STE 200 SAN FRANCISCO, CA 94102	942711726	S01(C)(3)	5,100.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO OPERA ASSOCIATION 301 VAN NESS AVE, DEV DEPT SAN FRANCISCO, CA 94102	940836240	501(C)(3)	6,144.	• 0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS

(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
SAN FRANCISCO SPCA 201 ALABAMA STREET SAN FRANCISCO, CA 94103	940836580	501(C)(3)	.062,6	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAN FRANCISCO SYMPHONY 201 VAN NESS AVE SAN FRANCISCO, CA 94102	941156284	501(C)(3)	42,400.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SAVE THE CHILDREN 54 WILTON ROAD WESTPORT, CT 06880	060726487	501(C)(3)	5,610.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SCHOOL OF THE MADELEINE 1225 MILVIA STREET BERKELEY, CA 94709	942955397	501(C)(3)	15,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SCHOOLS OF THE SACRED HEART 2222 BROADWAY SAN FRANCISCO, CA 94115	941156671	501(C)(3)	8,082.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SECOND HARVEST FOOD BANK-SANTA CLARA AND - 750 CURTNER AVE - SAN JOSE, CA 95125	942614101	501(C)(3)	12,713.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SELF HELP FOR THE ELDERLY 407 SANSOME STREET, SUITE 300 SAN FRANCISCO, CA 94111	941750717	501(C)(3)	6,854.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SEVEN HILLS SCHOOL 975 N SAN CARLOS DRIVE WALNUT CREEK, CA 94598	941628213	501(C)(3)	6,700.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SEVENTH DAY ADVENTIST OF PLEASANT HILL - 800 GRAYSON ROAD - PLEASANT HILL, CA 94523		501(c)(3)	7,129.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
							Schedule I (Form 990)

(a) Name and address of cash grant or government (b) EIN (c) IRC section or government (d) Amount of cash grant assistance (book, FMV, appriasal, other)	(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
SHELTER NETWORK 1450 CHAPIN AVENUE, SUITE 2 BURLINGAME, CA 94010	770160469	501(C)(3)	9,350.	Ö			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SHELTER, INC OF CONTRA COSTA COUNTY - 1815 ARNOLD DRIVE - MARTINEZ, CA 94553	680117241	501(C)(3)	8,643.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SHEPHERD OF THE HILLS CHURCH 580 TRINITY DRIVE VACAVILLE, CA 95687	942669448	501(C)(3)	21,138.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SMILE TRAIN INC 41 MADISON AVENUE, FLOOR 28 NEW YORK, NY 10010	133661416	501(C)(3)	5,419.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST ANDREWS PRESBYTERIAN CHURCH 1601 MARY DRIVE PLEASANT HILL, CA 94523	941587120	501(C)(3)	18,525.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST DOMINICS CHURCH 475 EAST I STREET BENICIA, CA 94510		501(C)(3)	8,540.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST IGNATIUS COLLEGE PREPARATORY 2001 37TH AVE SAN FRANCISCO, CA 94116	941451515	501(C)(3)	24,457.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST JUDE CHILDRENS RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	620646012	501(C)(3)	11,524.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST MARYS COLLEGE OF CALIFORNIA-MORAGA - 1928 ST MARYS ROAD - MORAGA, CA 94556	941156599	501(C)(3)	6,000.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
							Schedule I (Form 990)

Schedule | (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.)

(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
ST MARY-VIRGIN EPISCOPAL CHURCH 2325 UNION STREET SAN FRANCISCO, CA 94123		501(C)(3)	10,000.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST STEPHENS EPISCOPAL CHURCH-ORINDA - 66 ST STEPHENS DRIVE - ORINDA, CA 94563	941399270	501(C)(3)	54,987.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST VINCENT DE PAUL SOCIETY MARIN COUNCIL - PO BOX 150527 - SAN RAFAEL, CA 94901	941207701	501(C)(3)	12,500.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ST. ANTHONY FOUNDATION 150 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	941513140	501(c)(3)	13,293.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
STAND! AGAINST DOMESTIC VIOLENCE 1410 DANZIG PLAZA, SUITE 200 CONCORD, CA 94520	942476576	501(C)(3)	5,433.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
STANFORD UNIVERSITY 326 GALVEZ STREET, GIFT PROCESSING STANFORD, CA 94305	941156365	501(C)(3)	. 99,290.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SUMMER SEARCH FOUNDATION 500 SANSOME STREET, SUITE 350 SAN FRANCISCO, CA 94111	680200138	501(c)(3)	.000,66	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SUSTAINABLE CONSERVATION 98 BATTERY STREET, SUITE 302 SAN FRANCISCO, CA 94111	943232437	501(c)(3)	.002,2	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
SYRACUSE UNIVERSITY-NY 820 COMSTOCK AVE SYRACUSE, NY 13210	150532081	501(C)(3)	25,000.				DESIGNATED BY DONOR TO AGENCY FOR GENERAL

Schedule | (Form 990)

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

5 F 5 F DESIGNATED BY DONOR TO 임 ဥ 5 5 5 5 5 (h) Purpose of grant or assistance DESIGNATED BY DONOR AGENCY FOR GENERAL DPERATIONS OPERATIONS OPERATIONS OPERATIONS OPERATIONS **PERATIONS** DPERATIONS OPERATIONS **OPERATIONS** (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, 0 ö 。 ö ٥. ö Ö ö o (e) Amount of non-cash assistance 5,566. 20,950. (d) Amount of cash grant 000 7,500. 10,000 16,800 25,091 19,719 8,583 10 (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 946002123 943310845 680159458 042103634 946090626 133541913 680408159 942462357 680240341 (P) EIN FOUNDATION - 2890 MITCHELL DRIVE TRI VALLEY HAVEN FOR WOMEN, INC. TONY LA RUSSA'S ANIMAL RESCUE organization or government 7TH FLOOR (a) Name and address of TEACH FOR AMERICA BAY AREA 310 8TH STREET, SUITE 300 2080 ADDISON STREET #4200 2080 ADDISON STREET #4200 SAN FRANCISCO, CA 94103 WALNUT CREEK, CA 94598 UC REGENTS/UC BERKELEY UC BERKELEY FOUNDATION SAN RAFAEL, CA 94901 VACAVILLE, CA 95687 3663 PACIFIC AVENUE LIVERMORE, CA 94550 BERKELEY, CA 94720 BERKELEY, CA 94720 22 FOURTH STREET, TEAM UP FOR YOUTH OAKLAND, CA 94607 THE FATHERS HOUSE BOSTON, MA 02241 TUFTS UNIVERSITY 126 PEABODY RD TRIPS FOR KIDS 610 4TH STREET PO BOX 3306

Schedule I (Form 990)	UNITED WAY	WAY	OF	THE	THE BAY	OF THE BAY AREA
Part II Continuation o	Grants and Ot	her Ass	istand	e to G	overnme	ents and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
UC SANTA BARBARA FOUNDATION UNIV OF CA AT SANTA BARBARA SANTA BARBARA, CA 93106	237314834	501(C)(3)	5,234.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UCLA LAW SCHOOL 405 HIGARD LOS ANGELES, CA 90024	953688236	501(C)(3)	5,500.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNITED WAY SILICON VALLEY 1400 PARKMOOR AVENUE, SUITE 250 SAN JOSE, CA 95126	941450153	501(C)(3)	24,564.	• 0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNIVERSITY CORPORATION 1600 HOLLOWAY AVENUE, ROOM 361 SAN FRANCISCO, CA 94132	941384645	501(C)(3)	9,788.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNIVERSITY OF MICHIGAN LAW SCHOOL/ 109 E MADISON STREET, SUITE 3000 ANN ARBOR, MI 48104	386006309	501(C)(3)	10,000.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNIVERSITY OF SOUTHERN CALIFORNIA 3551 TROUSDALE PKWY, STE 252 LOS ANGELES, CA 90089	951642394	501(C)(3)	5,053.	0.			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726	390743975	501(C)(3)	8,100.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
VALLEY BIBLE CHURCH-HERCULES 1477 WILLOW AVENUE HERCULES, CA 94547	942208487	501(C)(3)	16,750.	0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
VALLEY CHRISTIAN CHURCH 7500 INSPIRATION DRIVE DUBLIN, CA 94568		501(C)(3)	20,016.	.0			BY DONOR TO GENERAL
							Schodille I (Earm 000)

Schedule I (Form 990) UNITED WAY OF THE BAY AREA Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) UNITED WAY OF THE BAY AREA

VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE, PMB 407727		,	assistance	valuation (book, FMV, appraisal, other)	or assistance
NASHVILLE, TN 37240 620476822	501(C)(3)	26,650.	.0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
VOLUNTEER LEGAL SERVICES PROGRAM 301 BATTERY STREET, THIRD FLOOR SAN FRANCISCO, CA 94111 942931349	501(C)(3)	5,400.	0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WALNUT CREEK CHURCH OF CHRIST 500 MINERT ROAD WALNUT CREEK, CA 94598 942659678	501(C)(3)	30,350.	0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WE CARE SERVICES FOR CHILDREN 2191 KIRKER PASS ROAD CONCORD, CA 94521 946050466	501(C)(3)	5,863.	· o		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WELLSPRING CHURCH 5674 STONERIDGE DRIVE, SUITE 110 PLEASANTON, CA 94588	501(C)(3)	10,000.	0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WHITNEY MUSEUM OF AMERICAN ART 945 MADISON AVENUE AT 7TH STREET NEW YORK, NY 10021 131789318	501(C)(3)	10,000.	.0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WILLIAMS COLLEGE 75 PARK STREET WILLIAMSTOWN, MA 01267 042104847	501(C)(3)	5,200.	.0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
WORLD AFFAIRS COUNCIL OF NORTHERN CA - 312 SUTTER ST STE 200 - SAN FRANCISCO, CA 94108 943053917	501(C)(3)	5,350.	.0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
YALE UNIVERSITY PO BOX 2038/DEVELOPMENT OFFICE NEW HAVEN, CT 06521 060646973	501 (C)(3)	10,000.	0		DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS Schedule I (Form 990)

(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
YMCA OF SAN FRANCISCO 50 CALIFORNIA STREET, SUITE 650 SAN FRANCISCO, CA 94111	940997140	501(c)(3)	9,302.	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
ZION LUTHERAN CHURCH PIEDMONT 5201 PARK BLVD PIEDMONT, CA 94611	946003242	501(c)(3)	.000,	.0			DESIGNATED BY DONOR TO AGENCY FOR GENERAL OPERATIONS
AMERICAN RED CROSS BAY AREA CHAPTER - 85 - 2ND STREET, 8TH FLOOR - SAN FRANCISCO, CA 94105	943045430	501(0)(3)	12,500.	.0			COMMUNITY READINESS INITIATIVE
ON THE MOVE 1801 OAK STREET NAPA, CA 94559	753149095	501(C)(3)	12,000.	0.			MCPHERSON COMMUNITY SCHOOL INITIATIVE
SAN FRANCISCO SCHOOL ALLIANCE 114 SANSOME STREET, SUITE 800 SAN FRANCISCO, CA 94104	943222869	S01(C)(3)	.000.	0.			SAN FRANCISCO BEAON INITIATIVE
STAR VISTA 610 ELM STREET, SUITE 212 SAN CARLOS, CA 94070	943094966	501(C)(3)	12,000.	•0			BELLE HAVEN ELEMENTARY FULL-SERVICE SCHOOL PROJECT
VALLEJO FIGHTING BACK PARTNERSHIP 505 SANTA CLARA STREET, 3RD FLOOR VALLEJO, CA 94590	680298092	501(¢)(3)	12,000.	0.			VALLEJO FULL-SERVICE COMMUNITY SCHOOL PROJECT
							Schedule I (Form 990)

94-1312348

Schedule | (Form 990) (2011) UNITED WAY OF THE BAY AREA

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the	de the information	n required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information.	
SCHEDULE I, PART I, LINE 2: FUNDING	G ALLOCATED	TO	AGENCIES AS D	DIRECTED BY	
OONORS:					
JNITED WAY OF THE BAY AREA RESPONSIBL	×	FULFILLS DONOR	INTENT,	INCLUDING	
REQUESTS TO FUND SPECIFIC NONPROFITS	THAT	MEET THE I	IRS QUALIFICATIONS	CATIONS OF A	
TAX EXEMPT CHARITABLE ORGANIZATION	UNDER	SECTION 170	170(C). ELIGIBLE	BLE	
ORGANIZATIONS ARE ALSO REQUIRED TO	BE IN	COMPLIANCE WITH	THE	SPIRIT AND	
INTENT OF THE USA PATRIOT ACT AND	OTHER CO	ER COUNTER TERR	TERRORISM LAWS.	•	
AND THE RESIDENCE OF THE PERSON OF THE PERSO					

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SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

UNITED WAY OF THE BAY AREA

Attach to Form 990.
See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 94-1312348

Pa	art I Questions Regarding Compensation		·	
		postavanos	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?		Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	1999000000000	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
þ	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		<u></u>

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

Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

UNITED WAY OF THE BAY AREA

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	netifiement and other deferred compensation	Nontaxable benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	€	264,800.	4,050.	8,064.	69,904.	2,906.	349,724.	• 0
1 ANNE WILSON	€	• 0	0	0.	• 0	- 1	- 1	0
	Ξ	222,491.	3,439.	6,068.	19,605.	19,417.	271,020.	0.
2 ERIC MCDONNELL	Ξ	0	0	0.		- 1	- 1	
	ε	179,099.	2,764.	.989	5,538.	10,607.	198,644.	
3 STUART CANNING	Ξ	0	0	0.	0.	0		
	ε	132,334.	1,864.	827.	7,481.	16,852.	159,358.	
4 LORNE NEEDLE	Ξ	0	0	0.		0	0.	
	€	121,770.	1,939.	826.	7,723.	18,077.	150,335.	
5 DEBRA REISENTHAL	(E)	• 0	0	0.	• 0	0	0	0
	ε							
9	€							
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16	Ξ						House, and the second s	The second secon
				Ç.			Schedu	Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any THE DEFINED BENEFITS PLAN OF ACTUARIAL VALUE OF THE (NOW FROZEN) DEFINED BENEFIT PLAN (\$49,738), HAVE THREE CURRENT 2012. HELEN ROSEN, EXECUTIVE DIRECTOR, TO INCLUDE THE ANNUAL ON FEBRUARY, 2012. IT. FOR UWBA'S PURPOSES, BOTH THE COMPANY PORTION THE CEO'S 401K EXPENSE (\$20,166) AS WELL AS THE ANNUAL INCREASE IN THE SEVERANCE BOTH OF THE SEVERANCE PAYS WILL BE REPORTED ON NEXT YEAR'S FORM 990, PART I, LINE 4A: DEBRA REISENTHAL, VP OF DEVELOPMENT RECEIVD THE ACTUARIAL VALUE OF A DEFINED BENEFIT PLAN. IRS DEFINES OTHER (III) AND ON 2012 W2S. \$33,819, IN FY12 þ OFFICERS OR KEY EMPLOYEES WERE PART OF SCHEDULE AS REPORTED ON $_{
m THE}$ OF PAY OF \$67,500, IN FY12 ON APRIL, HELPLINK, RECEIVED SEVERANCE PAY (C) PART II, COLUMN (B) COLUMN <u>C</u> COMPENSATION (COLUMN II' COO & VP, Part III Supplemental Information PART J, J, INCREASE IN additional information DIRECTORS, THE CEO, SCHEDULE SCHEDULE ı

BEEN INCLUDED TO ARRIVE AT \$69,904

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

UNITED WAY OF THE BAY AREA

Employer identification number 94-1312348

Par	tl Types o	of Property					
equantities	— — — — — — — — — — — — — — — — — — —		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	noncash cor	(d) of determining ntribution amounts
1	Art - Works of art						
2		asures					
3		terests					
4	Books and public	cations					
5		sehold goods	ı				
6	Cars and other ve	ehicles					
7	Boats and planes	3					
8		erty					
9	Securities - Public	cly traded	X	22	785,604.	PROCEEDS	FROM SALE
10	Securities - Close	ely held stock					
11	Securities - Partn	ership, LLC, or					
	trust interests						
12	Securities - Misce	ellaneous					
13	Qualified conserv	ation contribution -					
	Historic structure	es				-	
14	Qualified conserv	ation contribution - Other					
15	Real estate · Res	idential					
16	Real estate - Con	nmercial					
17	Real estate - Oth	er					
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20	Drugs and medic	al supplies					
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27	_)					
28	Other ()				<u></u>	
29		s 8283 received by the organ		-	1		0
	for which the org	anization completed Form 8	203, Part IV,	Donee Acknowled	gement 29		Yes No
00	5 4 4	(i d 4) i 4i i 4i	أفرر ما أم في ما ما		norted in Bort Lilings 1-29 th	et it must hold for	100000000000000000000000000000000000000
30a		did the organization receive ars from the date of the initia					
							30a X
		g period?					000
		e the arrangement in Part II. ation have a gift acceptance	nolicy that i	requires the review	of any non-etandard contrib	outions?	31 X
31		ation hire or use third parties					01 12
o∠a		ation nire or use third parties					32a X
h	If "Yes," describe						
33		e iii rait ii. In did not report an amount i	n column (c)	for a type of prope	erty for which column (a) is c	hecked.	
55	describe in Part		ii coluiiii (c)	ioi a type of prope	, ioi willon column (a) is c	,	
	uescribe ili Fart	11.					I

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

Schedule M (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

2011
Open to Public Inspection

Internal Revenue Service

Name of the organization

UNITED WAY OF THE BAY AREA

Employer identification number 94-1312348

FORM 990, PART I, LINE 6

VOLUNTEERS

VOLUNTEER NUMBER INCLUDES VOLUNTEERS WHO PROVIDE DIRECT SERVICE TO

UNITED WAY OF THE BAY AREA AS BOARD MEMBERS, VOLUNTEER TAX PREPARERS,

FUNDRAISERS AND CAMPAIGN COORDINATORS, ADVOCACY AND PUBLIC POLICY

VOLUNTEERS, AND VOLUNTEERS IN OTHER UNITED WAY OF THE BAY AREA

PROGRAMS, AS WELL AS VOLUNTEER MATCHING REFERRALS THAT MATCH AND

MOBILIZE VOLUNTEERS STRATEGICALLY TO MEET IDENTIFIED COMMUNITY NEEDS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

SERVICES IN ONE LOCATION FOR A PERSON OR FAMILY TRYING TO MOVE OUT OF

POVERTY. EXAMPLES OF SERVICES INCLUDE JOB PLACEMENT, WORKFORCE

DEVELOPMENT, CREDIT REPAIR, FINANCIAL EDUCATION AND COUNSELING, AND

ACCESS TO PUBLIC BENEFITS LIKE HEALTH COVERAGE OR CHILD CARE.

THE EARN IT! KEEP IT! SAVE IT! (EKS) PROGRAM IS AVAILABLE AT EACH

SPARKPOINT CENTER. IN ADDITION, UWBA AND PARTNERS OFFER EKS AROUND THE

BAY AREA AT OVER 200 FREE TAX SITES AND INVOLVING ALMOST 2,000

VOLUNTEERS. IRS CERTIFIED TAX PREPARERS HELP INDIVIDUALS AND FAMILIES

CLAIM THEIR MAXIMUM BENEFIT AND REFUND, INCLUDING THE EARNED INCOME TAX

CREDIT, THE CHILD TAX CREDIT AND OTHERS. EKS PARTNERS WITH HUNDREDS OF

COMMUNITY ORGANIZATIONS. IN FY12, EKS HELPED OVER 63,000 HOUSEHOLDS

WHO RECEIVED MORE THAN \$65 MILLION IN CREDITS AND REFUNDS, WHICH CAN

AMOUNT TO AS MUCH AS \$ 5,751 PER FAMILY.

Employer identification number 94-1312348

UNITED WAY OF THE BAY AREA

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER UNITED WAY OF THE BAY AREA COMMUNITY PROJECTS - UWBA OPERATES

OTHER PROGRAMS WHOSE INDIVIDUAL EXPENSES DO NOT EXCEED 20% OF THE TOTAL

FOR THIS CATEGORY. THESE PROJECTS TARGET AND SUPPORT BAY AREA

COMMUNITIES TO MEET THEIR NEEDS ACROSS OUR ISSUE AREAS. EXPENSES

INCLUDE THE COSTS OF PROGRAM-DEDICATED STAFF, CONSULTANTS, AND GRANTS

TO NONPROFIT ORGANIZATIONS THAT PROVIDE SERVICES TO THE COMMUNITY

PURSUANT TO THE PROGRAMS' CRITERIA AND OBJECTIVES. ONE EXAMPLE IS

MATCHBRIDGE.

MATCHBRIDGE HELPS YOUNG PEOPLE SUCCEED BY CONNECTING THEM WITH JOBS AND

INTERNSHIPS IN THE PRIVATE SECTOR. THROUGH THEIR EXPERIENCE WITH

MATCHBRIDGE, YOUNG PEOPLE LEARN THE IMPORTANCE OF COMPLETING HIGH

SCHOOL AND COLLEGE OR POST-SECONDARY TRAINING, WHILE LEARNING VALUABLE

SKILLS. MATCHBRIDGE PARTNERS WITH BUSINESSES, SCHOOLS, AND LOCAL

YOUTH-SERVING CBO'S TO HELP CREATE A WORKFORCE FOR THE 21ST CENTURY.

IN 2011-2012 THE PROGRAM PLACED 220 YOUTHS IN JOBS AND INTERNSHIPS, AND

THROUGH ITS SUMMER JOBS PLUS PARTNERSHIP WITH THE CITY OF SAN FRANCISCO

HELPED ENSURE OPPORTUNITIES FOR MORE THAN 5,000 YOUTH AND YOUNG ADULTS.

EXPENSES \$ 3,810,371. INCLUDING GRANTS OF \$ 339,248. REVENUE \$ 20,100.

FORM 990, PART VI, SECTION B, LINE 11: SENIOR VICE PRESIDENT OF FINANCE

AND ADMINISTRATION AND CONTROLLER REVIEW FINAL DRAFT OF 990 BEFORE

PRESENTING TO ALL VOTING MEMBERS OF THE BOARD FOR INFORMATIONAL REVIEW

PRIOR TO SUBMISSION. BOARD MEMBERS HAVE UP TO A WEEK TO RESPOND WITH

QUESTIONS, AFTER THAT, THE 990 IS SUBMITTED TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE UWBA IS COMMITTED TO THE

HIGHEST STANDARDS OF ETHICAL COMPLIANCE. OUR CORPORATE COMPLIANCE POLICY,
OUR CODE OF ETHICAL CONDUCT, AND OUR CONFLICT OF INTEREST POLICY ARE POSTED
ON OUR INTRANET AND ON OUR ORGANIZATION'S PUBLIC FACING WEB SITE. TAKEN
TOGETHER, THEY OUTLINE THE EXPECTATIONS THE UWBA HAS OF ITS EMPLOYEES,
VOLUNTEERS, AND REPRESENTATIVES. THE CONFLICT OF INTEREST POLICY CONTAINS
SPECIFIC INJUNCTIONS AGAINST ANY PRACTICE OR ACT WHICH CONFLICTS WITH OR
APPEARS TO CONFLICT WITH THE INTERESTS OF THE UWBA, BOTH ON AND OFF THE

JOB. IT GOES ON TO EXPLICITLY STATE THAT NO EMPLOYEE, VOLUNTEER, OR
REPRESENTATIVE SHALL USE HER/HIS POSITION OR INFLUENCE OR INFORMATION TO
WHICH THEY HAVE ACCESS TO AS A RESULT OF THEIR ASSOCIATION OR ANY ASSETS OR
RESOURCES OF THE UWBA FOR HER/HIS OWN PERSONAL GAIN, FOR TRADING OR FOR THE
IMPROPER BENEFIT OF OTHERS.

THE POLICY PROHIBITS PERFORMING COMPENSATED SERVICES FOR OR HAVING A
BENEFICIAL INTEREST IN, OR BEING SUBSTANTIALLY OBLIGATED TO (OR A SIMILAR
RELATIONSHIP FOR ANY FAMILY MEMBER OR CLOSE RELATIVE), ANY OF UWBA'S
SUPPLIERS OF GOODS OR SERVICES OR ANY OTHER ORGANIZATION DOING BUSINESS
WITH UWBA UNLESS SUCH FACT HAS BEEN PROPERLY DISCLOSED TO UWBA'S CEO AND TO
UWBA'S BOARD, AND SUCH RELATIONSHIP HAS BEEN SPECIFICALLY APPROVED BY THE
BOARD ON THE BASIS OF A FULL DISCLOSURE OF THE FACTS.

THE CODE OF ETHICAL CONDUCT SPECIFICALLY REQUIRES THE REPORTING OF

VIOLATIONS AND THE PROTECTION OF THOSE WHO REPORT VIOLATIONS. OUR CORPORATE

COMPLIANCE POLICY LAYS OUT A CLEARLY DEFINED PROCESS FOR EMPLOYEES AND

VOLUNTEERS TO FOLLOW IN ORDER TO DISCLOSE ANY REASONABLE BELIEF THAT

ANOTHER EMPLOYEE OR VOLUNTEER HAS VIOLATED LEGAL OR INTERNAL POLICY

STANDARDS, WHETHER IN THE WORKPLACE OR OTHERWISE AS PART OF UWBA'S

ACTIVITIES. INCLUDED IN THAT PROCEDURE IS A REPORT TO BE MADE TO THE BOARD

Schedule O (Form 990 or 990-EZ) (2011)

ANNUALLY REGARDING ITEMS BROUGHT TO THE ATTENTION OF THE CORPORATE

COMPLIANCE TASKFORCE, THE RESULTS OF THE INVESTIGATION THE TASKFORCE DID,

AND THE STEPS TAKEN TO ADDRESS THE CONCERNS RAISED, IF STEPS WERE MERITED.

THE TASKFORCE IS COMPOSED OF THE CHIEF EXECUTIVE OFFICER, THE CHIEF

OPERATING OFFICER, THE SENIOR VICE PRESIDENT OF FINANCE AND ADMINISTRATION,

AND THE CHIEF ETHICS OFFICER.

THE UNITED WAY OF THE BAY AREA HAS AN ANNUAL PROCESS FOR RE-AFFIRMING ITS

CONFLICT OF INTEREST, ITS CODE OF ETHICAL CONDUCT, ITS CORPORATE COMPLIANCE

AND DIVERSITY POLICIES.

FORM 990, PART VI, SECTION B, LINE 15: PROCESS FOR DETERMINING

COMPENSATION OF TOP MANAGEMENT AND OFFICERS/KEY EMPLOYEES IS THE SAME
UNITED WAY OF THE BAY AREA HAS A CONTRACTUAL RELATIONSHIP WITH AN

INDEPENDENT SALARY CONSULTANT WHO CONSIDERS INDUSTRY, POSITION, EXPERIENCE

AND MARKET BEFORE MAKING RECOMMENDATIONS TO UNITED WAY OF THE BAY AREA'S

COMPENSATION COMMITTEE. THE COMPENSATION COMMITTEE MEETS AT LEAST TWICE A

YEAR TO REVIEW CURRENT DATA, ANALYZE BUDGET ISSUES AND MAKE RECOMMENDATIONS

TO THE BOARD OF DIRECTORS. MINIMALLY, THE BOARD APPROVES THE COMPENSATION

OF THE CEO, CFO AND OTHER KEY EMPLOYEES ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT

OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE UNITED

WAY OF THE BAY AREA WEBSITE AS WELL AS BY REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-541,334.

CHANGE IN PENSION LIABILITY IN EXCESS OF INTANGIBLE PENSION

Schedule O (Form 990 or 990-EZ) (2011)

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

● If you a	are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box			X
	are filing for an Additional (Not Automatic) 3-Month Ex					•
	omplete Part II unless you have already been granted a					
Electron	ic filing $(e\text{-}file)$. You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tim	ne to file (6	months for a c	orporation
required :	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 88	368 to request a	an extension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for T	ransfers A	Associated With	n Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	tronic filing of t	his form,
visit www	r.irs.gov/efile and click on e-file for Charities & Nonprofits					
Part I					l)	
Part I onl						▶ □
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
Type or print	Name of exempt organization or other filer, see instru	ctions.		Employer	identification r	number (EIN) or
P	UNITED WAY OF THE BAY AREA			X	94-1312	2348
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s 221 MAIN STREET, NO. 300	ee instruc	tions.	Social se	curity number (SSN)
return. See instructions		oreign add	lress, see instructions.			
American Barrier more place the construction						0 1
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 990)	01	Form 990-T (corporation)			07
Form 990)-BL	02	Form 1041-A			08
Form 990)-EZ	01	Form 4720			09
Form 990		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11 12
Form 990	O-T (trust other than above) JOAN CATHERINE	06 BDAIII	Form 8870			12
• Th. b	ooks are in the care of > 211 MAIN ST.,			O. CA	94105	
Toloni	none No. ► 415-808-4465	<u> </u>	FAX No. ▶	0, 011		
	organization does not have an office or place of busines	s in the Ur	***************************************			
	is for a Group Return, enter the organization's four digit					up, check this
box >	. If it is for part of the group, check this box					
	equest an automatic 3-month (6 months for a corporation					
	FEBRUARY 15, 2013, to file the exemp				The extension	
is t	or the organization's return for:					
>	calendar year or					
>	X tax year beginning JUL 1, 2011	, ar	nd ending JUN 30, 2012		·	
2 If t	he tax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return	Final retur	'n	
	Change in accounting period					
	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		*	0.
	nrefundable credits. See instructions.		refundable gradite and	3a	\$	
	his application is for Form 990-PF, 990-T, 4720, or 6069,			3b	\$	0.
	timated tax payments made. Include any prior year over			30	Ψ	
	lance due. Subtract line 3b from line 3a. Include your pausing EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution	If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Fo			····
	For Privacy Act and Paperwork Reduction Act Notice,					8 (Rev. 1-2012)

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