

Form **990**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 7/01/06 , and ending 6/30/07

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

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

C Name of organization
UNITED WAY OF NORTH CENTRAL FLORIDA, INC

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
6031 NW 1ST PLACE

City or town, state or country, and ZIP + 4
GAINESVILLE FL 32607

D Employer identification number
59-0808855

E Telephone number
352-331-2800

F Accounting method: Cash
 Accrual Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H** and are not applicable to section 527 organizations. **I**
- H(a)** Is this a group return for affiliates? Yes No
- H(b)** If "Yes," enter number of affiliates Yes No
- H(c)** Are all affiliates included? Yes No
(If "No," attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes No
- I Group Exemption Number**
- M** Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.UNITEDWAYNCFL.ORG

J Organization type
(check only one) 501(c) (3) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 4,022,932

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b	3,860,006		
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d			
	e Total (add lines 1a through 1d) (cash \$ <u>3,842,126</u> noncash \$ <u>17,880</u>)	1e			3,860,006
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			65,580
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			82,897
	5 Dividends and interest from securities	5			
	6a Gross rents	6a			
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c				
7 Other investment income (describe)	7				
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	8a				
	b Less: cost or other basis and sales expenses	8b			
	c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d				
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a			
	b Less: direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c			
10a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11 Other revenue (from Part VII, line 103)	11			14,449	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			4,022,932	
Expenses	13 Program services (from line 44, column (B))	13			3,433,299
	14 Management and general (from line 44, column (C))	14			267,971
	15 Fundraising (from line 44, column (D))	15			354,562
	16 Payments to affiliates (attach schedule) SEE STATEMENT 1	16			34,658
	17 Total expenses. Add lines 16 and 44, column (A)	17			4,090,490
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18			-67,558
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			2,582,478
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2	20			125,223
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			2,640,143

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) STMT 3 (cash \$ 2,948,942 non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	2,948,942	2,948,942		
23	Specific assistance to individuals (attach schedule) STMT 4	3,574	3,574		
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule) SEE STATEMENT 5	95,221	23,805	23,805	47,611
25b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
26	Salaries and wages of employees not included on lines 25a, b, and c	444,498	212,941	111,841	119,716
27	Pension plan contributions not included on lines 25a, b, and c	27,731	11,980	7,052	8,699
28	Employee benefits not included on lines 25a - 27	55,395	23,926	14,089	17,380
29	Payroll taxes	40,728	17,516	10,391	12,821
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	20,971	7,113	6,204	7,654
34	Telephone	29,204	17,230	5,360	6,614
35	Postage and shipping	8,516	3,346	2,314	2,856
36	Occupancy	20,467	11,909	3,831	4,727
37	Equipment rental and maintenance	13,194	5,784	3,317	4,093
38	Printing and publications	76,590	17,663	5,960	52,967
39	Travel	11,411	4,289	3,189	3,933
40	Conferences, conventions, and meetings	18,430	8,331	4,521	5,578
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	36,867	16,174	9,265	11,428
43	Other expenses not covered above (itemize):				
43a	a SEE STATEMENT 6	204,093	98,776	56,832	48,485
43b	b				
43c	c				
43d	d				
43e	e				
43f	f				
43g	g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	4,055,832	3,433,299	267,971	354,562

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ ; (ii) the amount allocated to Program services \$ _____ ;

(iii) the amount allocated to Management and general \$ _____ ; and (iv) the amount allocated to Fundraising \$ _____

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

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?

▶ SEE STATEMENT 7

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a UNITED WAY OF ALACHUA COUNTY ALLOCATED FUNDING FOR LOCAL AND TAX EXEMPT ORGANIZATIONS. ALSO COSTS ASSOCIATED WITH AGENCY REVIEW ALLOCATIONS

(Grants and allocations \$ 2,548,942)

If this amount includes foreign grants, check here ▶

2,565,539

b UNITED WAY OF ALACHUA COUNTY PROVIDES AN INFORMATION AND REFERRAL SERVICE TO THE PUBLIC AND MAINTAINS A HUMAN SERVICES DIRECTORY

(Grants and allocations \$)

If this amount includes foreign grants, check here ▶

167,165

c THESE ARE COSTS ASSOCIATED WITH COMMUNICATIONS AND MEDIA TO PROMOTE THE DEVELOPMENT OF FINANCIAL RESOURCES TO MEET THE NEEDS OF THE COMMUNITY

(Grants and allocations \$ 400,000)

If this amount includes foreign grants, check here ▶

700,595

d

(Grants and allocations \$)

If this amount includes foreign grants, check here ▶

e Other program services (attach schedule)

(Grants and allocations \$)

If this amount includes foreign grants, check here ▶

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

▶ 3,433,299

Part IV Balance Sheets (See the instructions.)

				(A)		(B)	
				Beginning of year		End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.							
Assets	45	Cash-non-interest-bearing		50,823	45	77,153	
	46	Savings and temporary cash investments		1,547,883	46	2,241,892	
	47a	Accounts receivable	47a				
	b	Less: allowance for doubtful accounts	47b			47c	
	48a	Pledges receivable	48a	1,680,254			
	b	Less: allowance for doubtful accounts	48b	142,866	1,443,073	48c	1,537,388
	49	Grants receivable				49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att. schedule)				50b	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	13,705
	53	Prepaid expenses and deferred charges			102,559	53	3,023
	54a	Investments—publicly-traded securities SEE STATEMENT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV			608,751	54a	
	b	Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV				54b	
	55a	Investments-land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b			55c	
	56	Investments-other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis	57a	709,494			
	b	Less: accumulated depreciation (attach schedule) SEE STATEMENT 9	57b	261,788	470,812	57c	447,706
58	Other assets, including program-related investments (describe SEE STATEMENT 10)				58	1,702	
59	Total assets (must equal line 74). Add lines 45 through 58			4,223,901	59	4,322,569	
Liabilities	60	Accounts payable and accrued expenses		4,996	60	16,659	
	61	Grants payable		462,473	61	484,683	
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe SEE STATEMENT 11)			1,173,954	65	1,181,084
66	Total liabilities. Add lines 60 through 65			1,641,423	66	1,682,426	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.						
	67	Unrestricted		2,290,495	67	2,519,312	
	68	Temporarily restricted		264,200	68	68,048	
	69	Permanently restricted		27,783	69	52,783	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.						
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)			2,582,478	73	2,640,143
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73			4,223,901	74	4,322,569

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

Table with 3 columns: Question, Yes, No. Rows include 75a (total number of officers), 75b (relationships), 75c (compensation), and 75d (conflict of interest policy).

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans, (E) Expense account and other allowances. Row 1 contains 'N/A'.

Part VI Other Information (See the instructions.)

Table with 3 columns: Question, Yes, No. Rows include 76 (change in activities), 77 (changes in governing documents), 78a (unrelated business income), 78b (tax return), 79 (liquidation), 80a (related organization), 80b (name of organization), 81a (political expenditures), and 81b (Form 1120-POL).

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		N/A
83b			
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
84b			
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		N/A
c	Dues, assessments, and similar amounts from members		85c
d	Section 162(e) lobbying and political expenditures		85d
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		85e
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		85f
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
85g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
85h			
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		86a
b	Gross receipts, included on line 12, for public use of club facilities		86b
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		87a
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		87b
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
88b			
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="text" value="0"/> ; section 4912 <input type="text" value="0"/> ; section 4955 <input type="text" value="0"/>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
89b			
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<input type="text" value="0"/>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<input type="text" value="0"/>
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89e			
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89f			
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
89g			
90a	List the states with which a copy of this return is filed <input type="text" value="NONE"/>		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)		90b <input type="text" value="15"/>
91a	The books are in care of <input type="text" value="KAREN BRICKLEMYER"/> Telephone no. <input type="text" value="352-331-2800"/> <input type="text" value="6031 NW 1 PLACE"/> Located at <input type="text" value="GAINESVILLE, FL"/> ZIP + 4 <input type="text" value="32607"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text"/>		
91b		Yes	No
			X

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No X

If "Yes," enter the name of the foreign country

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include Program service revenue (TRANSFER FEES), Medicare/Medicaid payments, Fees and contracts from government agencies, Membership dues and assessments, Interest on savings and temporary cash investments, Dividends and interest from securities, Net rental income, and Subtotal.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes X No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a			
b			
c			
Totals				

107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a			
b			
c			
Totals				

108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No

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

Please Sign Here	Signature of officer	Date
	KAREN BRICKLEMYER Type or print name and title	PRESIDENT

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Instr. X) P00316108
	Firm's name (or yours if self-employed), address, and ZIP + 4	DAVIS, MONK & COMPANY 4010 NW 25 PLACE GAINESVILLE, FL 32606-6623	EIN	59-1756778 Phone no. 352-372-6300

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities (Yes: 1, No: X); 2. Acts with contributors (Yes: 2a, 2b, 2c, 2e, 3a, 3b, 3c, 3d, 4a, 4b, 4c; No: 2d); 3. Donor advised funds (Yes: u, No: 0).

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ►
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Intergrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					u

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Table with columns: Calendar year (or fiscal year beginning in), (a) 2005, (b) 2004, (c) 2003, (d) 2002, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit without charge; 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

Part V Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)				
32	Does the organization maintain the following:	32a		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32b		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32c		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32d		
d	Copies of all material used by the organization or on its behalf to solicit contributions?			
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)				
33	Does the organization discriminate by race in any way with respect to:	33a		
a	Students' rights or privileges?	33b		
b	Admissions policies?	33c		
c	Employment of faculty or administrative staff?	33d		
d	Scholarships or other financial assistance?	33e		
e	Educational policies?	33f		
f	Use of facilities?	33g		
g	Athletic programs?	33h		
h	Other extracurricular activities?			
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)				
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
If you answered "Yes" to either 34a or b, please explain using an attached statement.				
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768) N/A

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

Table with 4 columns: Line number, Description, (a) Affiliated group totals, (b) To be completed for all electing organizations. Rows 36-44 include lobbying expenditures, exempt purpose expenditures, and nontaxable amounts.

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 45 through 50 on page 13 of the instructions.)

Table titled 'Lobbying Expenditures During 4-Year Averaging Period' with columns for Calendar year (2006, 2005, 2004, 2003) and Total. Rows 45-50 include lobbying nontaxable amount, ceiling amount, total lobbying expenditures, grassroots nontaxable amount, and grassroots lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

Table with 3 columns: Yes, No, Amount. Rows a-i list lobbying activities: Volunteers, Paid staff or management, Media advertisements, Mailings to members, Publications, Grants to other organizations, Direct contact with legislators, Rallies/demonstrations, Total lobbying expenditures.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Federal Statements

Form 990 - General Footnote

Description

GRANTS AND ALLOCATIONS PART II LINE 22

COMMUNITY INVESTMENT PROCESS

UNITED WAY IS FOCUSED ON ADDRESSING CRITICAL ISSUES AND CREATING LASTING CHANGE. UNITED WAY IS INVESTING THESE FUNDS IN STRATEGIES AND PROGRAMS THAT ARE MAKING AN IMPACT ON THE AREA OF GREATEST NEED IN OUR COMMUNITY. MORE THAN 63 VOLUNTEERS FROM 29 DIFFERENT ORGANIZATIONS SPENT MORE THAN 1575 HOURS REVIEWING EXTENSIVE GRANT APPLICATIONS, ATTENDING SITE VISITS AND EVALUATING PRESENTATIONS BEFORE MAKING FUNDING DECISIONS. THIS ENHANCED PROCESS IS DESIGNED TO ACHIEVE UNITED WAY'S GOAL OF CREATING COMMUNITY IMPACT BY INVESTING IN FOCUSED STRATEGIES AND HIGH PERFORMANCE PROGRAMS THAT ACHIEVE RESULTS WITH LARGE POPULATIONS OF AT RISK PEOPLE.

DESIGNATIONS

INDIVIDUALS CHOOSE TO DIRECT THEIR INVESTMENT TO A SINGLE AGENCY, BYPASSING THE VOLUNTEER REVIEW PROCESS. UNITED WAY IS NOT RESPONSIBLE FOR THE EFFICIENCY OR EFFECTIVENESS OF THESE AGENCIES OR PROGRAMS. THESE AGENCIES MUST BE A TAX EXEMPT 501 (C) (3) NONPROFIT ORGANIZATION REGISTERED IN FLORIDA

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return UNITED WAY OF NORTH CENTRAL FLORIDA, INC	Identifying number 59-0808855
--	---

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	108,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	430,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2007. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	33,292

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2006	17	0
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	33,292
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)									25			
26 Property used more than 50% in a qualified business use:												
		%										
		%										
27 Property used 50% or less in a qualified business use:												
		%					S/L-					
		%					S/L-					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1									28			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1										29		

Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	31 Total commuting miles driven during the year											
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

		Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?			
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners			
39 Do you treat all use of vehicles by employees as personal use?			
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?			
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)			

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):					
43 Amortization of costs that began before your 2006 tax year				43	3,575
44 Total. Add amounts in column (f). See the instructions for where to report				44	3,575

Federal Statements

Statement 1 - Form 990, Part I, Line 16 - Payments to Affiliates

<u>Bus Name Address</u>	<u>Purpose</u>	<u>Amount</u>
UNITED WAY OF AMERICA 701 N FAIRFAX STREET ALEXANDRIA VA	NATIONAL AFFILIATE	\$ 34,658
TOTAL		<u>\$ 34,658</u>

Federal Statements

Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
NET UNREALIZED GAINS ON INVESTMENTS	\$ 125,223
TOTAL	\$ 125,223

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
HAV				NONE					
ACORN CLINIC				NONE	\$ 135	\$	\$		
23320 NORTH STATE ROAD					197,227				
BROOKER FL 32622									
ACT II COMPLEX				NONE					
ADOPTABLE CHILDREN, NORTH AMER. COU				NONE	130				
ADVANCING NATIVE MISSIONS				NONE	103				
ADVENTIST DEVELOPMENT RELIEF				NONE	260				
AFRICA AIDS WATCH				NONE	520				
AFRICARE				NONE	104				
AID TO AFRICA FEDERATION, INC.				NONE	358				
AIDS FUND, NATIONAL				NONE	104				
AIDS TREATMENT AND RESEARCH				NONE	122				
ALACHUA COUNTY COALITION FOR THE HO				NONE	235				
ALACHUA COUNTY HUMANE SOCIETY				NONE	260				
2029 NW 6TH STREET					22,706				
GAINESVILLE FL 326073527									

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explntn
ALACHUA COUNTY LIBRARY DISTRICT 401 EAST UNIVERSITY AVENUE GAINESVILLE FL 32601	FND	NONE			\$ 4,880	\$	\$		
ALACHUA COUNTY PUBLIC SCHOOLS FND. 1725 SE 1ST AVENUE GAINESVILLE FL 32641	FND.	NONE			4,755				
ALACHUA CTY. HEALTHY KIDS 6031 NW 1ST PLACE GAINESVILLE FL 32607		NONE			7,941				
ALACHUA HABITAT FOR HUMANITY 2317 SW 13TH STREET GAINESVILLE FL 32608		NONE			29,860				
ALASKA CONSERVATION FOUNDATION		NONE			260				
ALLERGY & ASTHMA NETWORK/MOTHERS		NONE			156				
ALLIANCE TO SAVE ENERGY		NONE			520				
ALSAC-ST. JUDE CHILDREN'S RESEARCH		NONE			1,266				
ALTRUSA HOUSE		NONE			3,016				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explantn
			Gift	Description of Property			
P.O. BOX 142811							
GAINESVILLE FL 326142811			\$		\$		\$
ALZHEIMER'S AND AGING RESEARCH	NONE						723
ALZHEIMER'S ASSOC. CENTRAL & NORTH	NONE						373
988 WOODCOCK ROAD, SUITE 200							
ORLANDO FL 32803							
ALZHEIMER'S ASSOCIATION NCF	NONE						16,386
1831 NW 13TH STREET, SUITE # 4							
GAINESVILLE FL 32609							
ALZHEIMER'S FOUNDATION OF AMERICA	NONE						335
ALZHEIMER'S RESEARCH FND, FISHER CE	NONE						882
AMC CANCER RESEARCH CENTER	NONE						234
AMERICAN ASSOCIATION FOR CANCER RES	NONE						260
AMERICAN BIRD CONSERVANCY	NONE						1,040
AMERICAN CANCER SOCIETY, INC.	NONE						25,678
2119 SW 16TH STREET							
GAINESVILLE FL 326081400							

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
Date of Gift	Description of Property						
AMERICAN CIVIL LIBERTIES UNION	NONE						
			\$ 208	\$	\$		
AMERICAN DIABETES ASSOC.	NONE		9,906				
8384 BAYMEADOWS ROAD, SUITE 10							
JACKSONVILLE FL 322567437							
AMERICAN FOUNDATION FOR AIDS RESEAR	NONE		2,557				
AMERICAN HEART ASSOC, FL/PUERTO RIC	NONE		7,125				
AMERICAN HEART ASSOC. OF GAINESVILL	NONE		1,199				
3801 NW 40TH TERRACE #B							
GAINESVILLE FL 326066183							
AMERICAN HOSPICE FOUNDATION	NONE		544				
AMERICAN HUMANE ASSOCIATION	NONE		792				
AMERICAN KIDNEY FUND	NONE		1,346				
AMERICAN LIVER FOUNDATION	NONE		144				
AMERICAN LUNG ASSOCIATION OF FLORID	NONE		4,165				
AMERICAN RED CROSS	NONE		54,436				
6031 NW 1ST PLACE							
GAINESVILLE FL 32607							

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Description of Property	Relationship to Org	Class of Activity		Book Value	BV Explantn	FMV Explantn
				Cash Contrib	NonCash Contrib			
AMERICAN RED CROSS FLORIDA'S COAST		NONE		\$ 588	\$			
AMERICANS FOR INDIAN OPPORT.		NONE		130				
AMERICARES FOUNDATION, INC.		NONE		249				
AMERICA'S SECOND HARVEST		NONE		668				
ANIMAL CHARITIES OF AMERICA		NONE		383				
P.O BOX 45756								
SAN FRANCISCO CA 94145								
ANIMAL LEGAL DEFENSE FUND		NONE		130				
ANNIE W. JOHNSON SENIOR SERVICE CEN		NONE		267				
ANOTHER WAY (LAKE CITY)		NONE		182				
ANOTHER WAY, INC.		NONE		25,316				
PO BOX 1028								
LAKE CITY FL 32056								
APPALACHIAN TRAIL CONSERVANCY		NONE		327				
ARBOR HOUSE, INC.		NONE		13,590				
PO BOX 12363								
GAINESVILLE FL 32604								

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift		Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
ARC FLORIDA INC.					NONE					
ARC MARION, INC.					NONE	\$ 295	\$			
2800 SE MARICAMP ROAD						650				
Ocala FL 34471										
ARC OF ALACHUA COUNTY					NONE					
3303 NW 83RD ST						63,749				
GAINESVILLE FL 32606										
ARCHDIOCESE FOR THE MILITARY SERVIC					NONE					
ARK OF HOPE FOR CHILDREN, INC.					NONE			390		
ARTHRITIS FOUNDATION - NE FL BRANCH					NONE			259		
314 PALMETTO STREET								2,271		
JACKSONVILLE FL 32205										
ARTHRITIS NATIONAL RESEARCH FOUNDAT					NONE			155		
ASPCA: AMER. SOCIETY P.C.A.					NONE			454		
ASSISTANCE DOG UNITED CAMPAIGN					NONE			177		
ASTHMA AND ALLERGY FOUND OF AMER					NONE			240		
AUTISM INTERVENTION AND TREATMENT					NONE			104		

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explantn
			Gift	Description of Property			
AUTISM RESEARCH - THE AUTISM SOCIET	NONE						
			\$				
BAPTIST CHILDREN'S HOME MINIST.	NONE			105	\$		
				1,014			
BAPTIST WORLD ALLIANCE	NONE			520			
BAT CONSERVATION INTERNATIONAL	NONE			138			
BIG BROTHERS BIG SISTERS OF AMERICA	NONE			77,616			
230 NORTH 13TH STREET							
PHILADELPHIA PA 19107							
BIRTH DEFECT RESEARCH FOR CHILDREN	NONE			169			
BLUE CARD, INC.	NONE			130			
BOOTSTRAP FUND	NONE			260			
BOSTON TERRIER RESCUE	NONE			130			
BOY SCOUTS OF AMERICA, NFC (UNAFF.)	NONE			32,558			
521 EDGEWOOD AVE. SOUTH							
JACKSONVILLE FL 32205							
BOYS & GIRLS CLUB OF DELRAY BEACH	NONE			182			
BOYS AND GIRLS CLUB OF ALACHUA	NONE			202,705			
PO BOX 532							

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
GAINESVILLE FL 32602					\$	\$	\$		
BRAZIL FOUNDATION	NONE				600				
BREAD & WATER FOR AFRICA, INC. 2550 HUNTINGTON AVE, SUITE 200 ALEXANDRIA VA 22303	NONE				143				
BREAD OF THE MIGHTY FOOD BANK	NONE				156				
BREAST CANCER COALITION	NONE				597				
BREAST CANCER FOUNDATION, SUSAN G.	NONE				793				
BREAST CANCER FUND	NONE				440				
BREAST CANCER RESEARCH & ASSISTANCE	NONE				410				
BREAST CANCER RESEARCH FOUNDATION	NONE				230				
BROTHERS KEEPER 5 SE 17TH STREET OCALA FL 34471	NONE				156				
BUCKNER ORPHAN CARE INTERNATIONAL,	NONE				130				
CAMP BOGGY CREEK	NONE				294				
CANCER COALITION, INC.	NONE				104				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
Date of Gift	Description of Property						
CANCER IMMUNOLOGY RESEARCH	NONE						
			\$ 156	\$			
CANCER RESEARCH AND PREVENTION	NONE		1,393				
CANCER RESEARCH FOR CHILDREN	NONE		948				
CANCER RESEARCH FOUNDATION	NONE		338				
CANCER RESEARCH INSTITUTE	NONE		350				
CANCER TREATMENT RESEARCH FOUNDATIO	NONE		265				
CANINE ASSISTANTS	NONE		391				
CARE	NONE		400				
CARTER CENTER	NONE		245				
CASA - COURT APPOINTED ADVOC.	NONE		286				
CATHOLIC CHARITIES - TALLAHASSEE	NONE		780				
885 W. CAROLINA STREET							
TALLAHASSEE FL 32304							
CATHOLIC CHARITIES BUREAU, INC.	NONE		96,720				
1717 NE 9TH ST							
GAINESVILLE FL 32609							
CATHOLIC CHARITIES USA	NONE		462				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explantn
			Gift	Description of Property			
1731 KING STREET							
ALEXANDRIA VA 22314			\$		\$		\$
CATHOLIC RELIEF SERVICES (USCC)	NONE				1,070		
CATHOLICS UNITED FOR LIFE	NONE				469		
CENTER FOR AUTISM & RELATED DISEASE	NONE				120		
CHILD ADVOCACY CENTER	NONE				86,629		
PO BOX 1128							
GAINESVILLE FL 32602							
CHILD CONCERN AND CARE FUND	NONE				156		
CHILDHELP USA	NONE				162		
CHILDREN'S ANGEL FLIGHT	NONE				651		
CHILDREN'S CHARITIES OF AMERICA	NONE				243		
PO BOX 45757							
SAN FRANCISCO CA 94145							
CHILDREN'S COMPASSION FUND	NONE				130		
CHILDREN'S DREAM FUND	NONE				189		
CHILDREN'S FOOD & CARE FUND	NONE				260		

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
Date of Gift	Description of Property						
CHILDREN'S FOOD FUND/WORLD EM RE	NONE						
			\$ 578	\$			
CHILDREN'S HEART FOUNDATION INTL	NONE		130				
CHILDREN'S HOME SOCIETY	NONE		56,295				
605 NE 1ST ST SUITE H							
GAINESVILLE FL 32601							
CHILDREN'S HOPE INTERNATIONAL FOUND	NONE		130				
CHILDREN'S HOPES & DREAMS	NONE		169				
CHILDREN'S HUNGER FUND FOUNDATION	NONE		120				
CHILDREN'S HUNGER RELIEF FUND	NONE		207				
CHILDREN'S MEDICAL MINISTRIES	NONE		275				
CHILDREN'S MIRACLE NETWORK	NONE		965				
SHANDS CHILDREN'S HOSPITAL							
GAINESVILLE FL 326100386							
CHILDREN'S RELIEF MISSION	NONE		495				
CHRISTIAN APPALACHIAN PROJ.	NONE		1,040				
CHRISTIAN CHILDREN'S FUND	NONE		148				
CHRISTIAN FAMILY SERVICES	NONE		1,060				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explantn
			Gift	Description of Property			
2720 S.W. 2ND AVENUE							
GAINESVILLE FL 32607			\$		\$		\$
CHRISTIAN HELP FOUNDATION	NONE				231		
CHRISTIAN MEDICAL & DENTAL ASSOC	NONE				140		
CHRISTIAN ORTHOPAEDIC PARTNERS	NONE				135		
CHRISTIAN WORLD ADOPTION	NONE				190		
CHURCH WITHOUT WALLS	NONE				130		
CIVIC MEDIA CENTER	NONE				649		
1021 WEST UNIVERSITY AVENUE							
GAINESVILLE FL 32601							
CIVIL WAR PRESERVATION TRUST	NONE				126		
CLEFT PALATE FOUNDATION	NONE				312		
COMMUNITY HEALTH CHARITIES	NONE				1,234		
PO BOX 75153							
BALTIMORE MD 212755153							
CONCERNS OF POLICE SURVIVORS INC	NONE				163		
CONSERVATION & PRESERVATION	NONE				120		

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
P.O. BOX 45759					\$	\$	\$		
SAN FRANCISCO CA 94145									
CONSERVATION FUND, THE	NONE				580				
CONSUMER CREDIT COUNSELING	NONE				1,988				
PO BOX 4110									
OCALA FL 34478									
CORNELIA DE LANGE SYNDROME	NONE				104				
CORNER DRUG STORE	NONE				57,725				
1300 NW 6TH ST									
GAINESVILLE FL 32601									
CORRECTIONAL PEACE OFFICERS FOUNDAT	NONE				1,486				
CREATIVE SERVICES, INC.	NONE				234				
CROHN'S & COLITIS FOUNDATION OF AME	NONE				3,072				
CURE CHILDHOOD CANCER, (NCC FD)	NONE				104				
CYSTIC FIBROSIS FOUNDATION	NONE				2,063				
4902 EISENHOWER BLVD,STE 115									
TAMPA FL 33634									

Federal Statements

Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Date of Gift	Relationship to Org	Description of Property	Class of Activity			BV Explantn	FMV Explantn
				Cash Contrib	NonCash Contrib	Book Value		
DEFENDERS OF WILDLIFE			NONE					
				\$ 126	\$			
DIABETES & IMMUNE DISEASE			NONE	212				
10355 SCIENCE CENTER DRIVE								
SAN DIEGO CA 92121								
DIABETES ACTION RESEARCH AND			NONE	370				
DIABETES NATIONAL RESEARCH GROUP			NONE	303				
DIABETES RESEARCH & WELLNESS FOUNDA			NONE	656				
DIABETES RESEARCH INSTITUTE FOUNDAT			NONE	3,421				
DISABLED AMERICAN VETERANS			NONE	554				
P.O. BOX 999								
MICANOPY FL 32667								
DOCTORS WITHOUT BORDERS USA			NONE	1,469				
DOGS FOR THE DEAF			NONE	260				
DOWN SYNDROME RESEARCH & TREATMENT			NONE	232				
DREAM-A-WISH FOUNDATION			NONE	384				
DREAMS CAN BE FOUNDATION			NONE	440				
DREAMS COME TRUE			NONE	531				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash	NonCash	Book	BV	FMV
					Contrib	Contrib	Value	Explantn	Explantn
6803 SOUTHPOINT PARKWAY JACKSONVILLE FL 32216					\$	\$	\$		
DRESS FOR SUCCESS WORLDWIDE	NONE				156				
EARLY LEARNING COALITION 1204 NW 13TH ST GAINESVILLE FL 32605	NONE				152,694				
EARTH SHARE DEPT. 4011 WASHINGTON DC 200424011	NONE				313				
EASTER SEALS FLORIDA AT ALTRUSA HOU 2002 NW 36TH AVE GAINESVILLE FL 32605	NONE				5,123				
EASTER SEALS OF FLORIDA, INC.	NONE				207				
ELDER CARE OF NORTH CENTRAL FLORIDA 4026 NW 22ND DR GAINESVILLE FL 32605	NONE				148,353				
ENTOMOLOGICAL FOUNDATION, INC.	NONE				1,164				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Cash Contrib	NonCash Contrib	Book Value	BV Explntn	FMV Explntn
Date of Gift	Description of Property						
ENVIRONMENTAL DEFENSE	NONE						
			\$ 252	\$	\$		
EQUESTRIAN LAND CONSERVATION RESOUR	NONE		290				
EQUINE REPRODUCTION GRADUATE TRAVEL	NONE		2,000				
FACES: THE NATIONAL CRANIOFACIAL AS	NONE		156				
FARM ANIMAL REFORM MOVEMENT	NONE		130				
FATHER FLANAGAN'S BOYS' HOME	NONE		108				
FEDERAL EMPLOYEE EDUCATION AND	NONE		427				
FEED MY PEOPLE CHIDREN'S CHARITY	NONE		180				
FEED MY STARVING CHILDREN	NONE		500				
FEED THE CHILDREN	NONE		1,608				
FINCA INTERNATIONAL	NONE		234				
FIRST AMERICAN CULTURE AND	NONE		480				
FISCAL AGENT - UW NORTH CENTRAL FLO	NONE		208				
FISHER HOUSE FOUNDATION	NONE		510				
FLORIDA 4-H CLUB FOUNDATION, INC.	NONE		5,775				
PO BOX 110225							
GAINESVILLE FL 326110225							

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
FLORIDA BAPTIST CHILDREN'S HOME PO BOX 8190 LAKELAND FL 33802	NONE				\$ 230	\$	\$		
FLORIDA DEFENDERS OF THE ENVIRONMEN 4424 NW 13TH ST., SUITE C-8 GAINESVILLE FL 32609	NONE				7,583				
FLORIDA DIABETES CAMP PO BOX 14136 GAINESVILLE FL 32604	NONE				18,666				
FLORIDA HOSPICES & PALLIATIVE CARE 1616 D METROPOLITAN CIRCLE TALLAHASSEE FL 32308	NONE				2,243				
FLORIDA NATIVE PLANT SOCIETY FLORIDA SHERIFFS YOUTH RANCHES FLORIDA SIDS ALLIANCE	NONE NONE NONE				371 500 429				
FLORIDA UNITED METHODIST CHILDREN'S FLORIDA WILDLIFE CARE, INC.	NONE NONE				1,500 5,192				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explantn
			Gift	Description of Property			
3400 SE 15TH STREET GAINESVILLE FL 32641			\$		\$		
FLORIDA WILDLIFE FEDERATION PO BOX 6870 TALLAHASSEE FL 323146870	NONE				5,742		
FOCUS ON THE FAMILY FOOD FOR THE POOR INC. 550 S.W. 12TH AVENUE, DEERFIELD BEACH FL 33442	NONE				152		
					1,360		
FREEDOM RIDE FRIENDS OF ANIMALS FRIENDS OF CHILDREN OF NORTH CENTRA	NONE				390		
					130		
FRIENDS OF THE CRISIS CENTER, INC. 6115 SW 137TH AVE. ARCHER FL 32618	NONE				520		
					750		
FRIENDS OF WFP, INC. GAINESVILLE COMMUNITY MINISTRIES	NONE				520		
					21,793		

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
238 SW 4TH AVE GAINESVILLE FL 32601					\$	\$	\$		
GAINESVILLE HARVEST 7257 NW 4TH BLVD. PMB #114 GAINESVILLE FL 32607	NONE				16,624				
GAINESVILLE PET RESCUE 600 NW 75TH ST. SUITE C GAINESVILLE FL 32607	NONE				39,824				
GATOR BOOSTERS GAY & LESBIAN HUMAN RIGHTS COMMISSI	NONE				6,800				
GIRL SCOUTS HEART OF FLORIDA COUNCI 1831 NORTH GILMORE AVENUE LAKELAND FL 33805	NONE				299				
GIRL SCOUTS OF GATEWAY COUNCIL 1000 SHEARER ST JACKSONVILLE FL 32205	NONE				416				
GIRLS CLUB OF NORTH CENTRAL FLORIDA	NONE				14,512				
					31,894				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Relationship to Org	Description of Property	Class of Activity			BV Explantn	FMV Explantn
				Cash Contrib	NonCash Contrib	Book Value		
801 N. MAGNOLIA AVE SUITE 305 ORLANDO FL 32802				\$	\$	\$		
GIVE KIDS THE WORLD			NONE		496			
GLOBAL IMPACT PO BOX 409616 ATLANTA GA 303849616			NONE		360			
GLUTEN INTOLERANCE GROUP N.A.			NONE		130			
GREYHOUND FOUNDATION, INC.			NONE		497			
GUARDIAN FOUNDATION, INC.			NONE		6,841			
GUIDE DOG FOUNDATION FOR THE BLIND			NONE		435			
GUIDE DOGS OF AMERICA			NONE		104			
GULF COAST JEWISH FAMILY SERVICES,			NONE		980			
HABITAT FOR HUMANITY - J'VILLE			NONE		120			
HABITAT FOR HUMANITY INTERNATIONAL			NONE		1,435			
HAPPY HOUSE PO BOX 1282 LAKE CITY FL 320561282			NONE		332			

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
HAVEN HOSPICE BAYOU BASH	NONE								
					\$ 2,500	\$	\$		
HAVEN HOSPICE OF NORTH CENTRAL FLOR	NONE				58,971				
HEADSTART	NONE				149				
HEARTS UNITED FOR ANIMALS	NONE				819				
HEIFER INTERNATIONAL	NONE				688				
HEMOPHILIA FOUNDATION OF GREATER FL	NONE				277				
HI TEC TUTORING CENTER	NONE				1,040				
HOLE IN THE WALL GANG FUND	NONE				325				
HOME INSTRUCTION FOR PARENTS OF PRE	NONE				80,000				
HOMELESS CHILDREN	NONE				260				
HOPE HORSES HELPING PEOPLE, INC.	NONE				2,490				
HOSPICE FOUNDATION OF AMERICA	NONE				590				
HOSPICE OF MARION COUNTY	NONE				260				
PO BOX 4860									
OCALA FL 344784860									
HOSPICE OF THE COMFORTER	NONE				1,201				
HUMAN RIGHTS WATCH	NONE				260				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explntn
			Gift	Description of Property			
HUNGER DEFENSE FUND	NONE						
			\$	139	\$		
I HAVE A DREAM FOUNDATION	NONE			111			
IN DEFENSE OF ANIMALS	NONE			130			
INDIA CULTURAL & EDUCATION CENTER	NONE			3,257			
10609 SW 12TH TERRACE							
GAINESVILLE FL 32667							
INJURED MARINE SEMPER FI FUND	NONE			130			
INTERFAITH HOSPITALITY NETWORK	NONE			728			
PO BOX 880							
GAINESVILLE FL 32602							
INTERNATIONAL ASSOCIATION FOR HUMAN	NONE			234			
INTERNATIONAL CRANE FOUNDATION	NONE			130			
INTERNATIONAL ELEPHANT FOUNDATION	NONE			260			
INTERNATIONAL EYE FOUNDATION	NONE			643			
INTERNATIONAL HEARING DOG, INC.	NONE			130			
INTERNATIONAL ORTHODOX CHRISTIAN	NONE			520			
ISAIAH'S FOUNDATION, INC.	NONE			150			

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Relationship to Org	Description of Property	Cash Contrib	Class of Activity	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
ISKCON OF GAINESVILLE - (UNAFF.) 214 NW 14TH STREET GAINESVILLE FL 32603			NONE	\$ 867		\$			
JANE GOODALL INSTITUTE FOR WLDLIFE JEWS FOR JESUS JUNIOR ACHIEVEMENT PO BOX 141284 GAINESVILLE FL 32614			NONE	129					
			NONE	150					
			NONE	1,000					
JUVENILE DIABETES RESEARCH FOUNDATI KIDS BEATING CANCER LA LECHE LEAGUE INTERNATIONA LANCE ARMSTRONG FOUNDATION LAZARUS RESTORATION MINISTRY P.O. BOX 5163 GAINESVILLE FL			NONE	3,026					
			NONE	566					
			NONE	260					
			NONE	455					
			NONE	2,730					
LEUKEMIA & LYMPHOMA SOCIETY, INC. LUPUS FOUNDATION OF AMERICA			NONE	575					
			NONE	3,231					

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
300 SOUTH DUNCAN AVENUE, # 235 CLEARWATER FL 33755					\$	\$	\$		
LUTHERAN WORLD RELIEF	NONE				204				
MAKE A WISH FOUNDATION OF CENTRAL 1053 NORTH ORLANDO AVENUE, STE.1 MAITLAND FL 32751	NONE				1,982				
MARCH OF DIMES 1831 N.W. 13 STREET, STE. 3 GAINESVILLE FL 32605	NONE				14,343				
MARINE CORPS SCHOLARSHIP FND.	NONE				526				
MARION COUNTY SENIOR SERVICES 1101 SW 20TH COURT OCALA FL 344748685	NONE				260				
MERCY SHIPS	NONE				676				
MERIDIAN BEHAVIORAL HEALTHCARE 4300 SW 13TH ST GAINESVILLE FL 32608	NONE				6,901				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Relationship to Org	Description of Property	Class of Activity			BV Explantn	FMV Explantn
				Cash Contrib	NonCash Contrib	Book Value		
MESOTHELIOMA APPLIED RESEARCH FOUND			NONE	\$ 2,230	\$			
METHODIST MISSION HOME			NONE	135				
MILITARY OFFICERS ASSOCIATION OF			NONE	110				
MULTIPLE SCLEROSIS FOUNDATION			NONE	248				
MUSCULAR DYSTROPHY ASSOCIATION			NONE	1,678				
MUSTARD SEED MINISTRIES			NONE	130				
NAACP LEGAL DEFENSE & EDUC. FUND			NONE	753				
NAACP SPECIAL CONTRIBUTION FUND			NONE	156				
NAMI FLORIDA			NONE	2,192				
NATIONAL ASSOC. OF PEOPLE W/AIDS			NONE	260				
NATIONAL BLACK CHILD DEVELOPMENT IN			NONE	656				
NATIONAL BLACK UNITED FED.			NONE	156				
40 CLINTON STREET, 5TH FLOOR								
NEWARK NJ 7102								
NATIONAL COUNCIL FOR BLACK STUDIES			NONE	137				
NATIONAL ENVIRONMENTAL TRUST			NONE	156				
1200 18TH STREET NW								

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift		Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
WASHINGTON DC 20036						\$	\$	\$		
NATIONAL FFA FOUNDATION	NONE					645				
NATIONAL HOSPICE PALLATIVE ORGANIZA	NONE					195				
NATIONAL KIDNEY FOUNDATION	NONE					2,274				
1040 WOODCOCK ROAD, SUITE 119										
ORLANDO FL 32803										
NATIONAL MENTAL HEALTH ASSOC.	NONE					195				
NATIONAL MILITARY FAMILY ASN.	NONE					390				
NATIONAL MULTIPLE SCLEROSIS SOCIETY	NONE					6,820				
4237 SALISBURY ROAD, SUITE 406										
JACKSONVILLE FL 32216										
NATIONAL PARKINSON FOUNDATION, INC.	NONE					2,550				
NATIONAL PARKS & CONSERV. ASN.	NONE					407				
NATIONAL PUBLIC RADIO, INC.	NONE					442				
635 MASSACHUSETTS AVENUE, NW										
WASHINGTON DC 20001										
NATIONAL WILDLIFE FEDERATION	NONE					390				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
Date of Gift	Description of Property						
NATURAL RESOURCES DEFENSE COUNCIL	NONE		\$ 153	\$			
NATURE CONSERVANCY, THE	NONE		3,223				
NEIGHBORHOOD HOUSING & DEVELOPMENT	NONE		1,054				
633 NW 8TH AVENUE							
GAINESVILLE FL 32601							
NHA SCHOLARSHIP FUND	NONE		250				
P.O. BOX 180578							
CORONADO CA 92178							
NO MORE HOMELESS PETS IN ALACHUA CO	NONE		8,545				
P.O. BOX 358466							
GAINESVILLE FL 32653							
NORTH CENTRAL FLORIDA YMCA	NONE		105,314				
5201 NW 34TH ST							
GAINESVILLE FL 32605							
NRA CIVIL RIGHTS DEFENSE FUND	NONE		1,298				
OBSESSIVE COMPULSIVE FOUNDATION	NONE		130				
OMAHA THEATER COMPANY	NONE		200				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
ONE CHILD AT A TIME				NONE					
					\$ 260	\$			
OPERATION BLESSING INTL. RELIEF				NONE	180				
OPERATION CATNIP OF GAINESVILLE				NONE	10,535				
PO BOX 141023									
GAINESVILLE FL 326141023									
OSTEOPOROSIS & BREAST CANCER RESEAR				NONE	130				
OUTREACH INTERNATIONAL				NONE	442				
PACE CENTER FOR GIRLS				NONE	768				
112 WEST ADAMS STREET, SUITE 500									
JACKSONVILLE FL 32202									
PARALYZED VETERANS OF AMERICA				NONE	224				
PARKINSON'S ACTION NETWORK				NONE	306				
1025 VERMONT AVE NW, SUITE 1120									
WASHINGTON DC 20005									
PARTNERSHIP FOR STRONG FAMILIES				NONE	300,282				
PAUL MCKNIGHT - DESIGNATIONS				NONE	11,620				
PAWS WITH A CAUSE				NONE	1,341				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift		Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
PEACE ACTION EDUCATION FUND					NONE					
						\$ 249	\$			
PEACEFUL PATHS					NONE	158,112				
PO BOX 5099										
GAINESVILLE FL 32627										
PEDIATRIC AIDS FOUNDATION					NONE	260				
PEOPLE FOR ETHICAL TREATMENT ANIMAL					NONE	260				
PERSECUTED CHRISTIANS CARE FUND					NONE	260				
PHYSICIANS COMMITTEE FOR					NONE	260				
PLANNED PARENTHOOD OF NORTH CENTRAL					NONE	71,043				
1240 NW 11TH AVE, SUITE B										
GAINESVILLE FL 32601										
PLEASANT PLACE					NONE	10,007				
732 NW 4TH ST										
GAINESVILLE FL 32601										
POSTAL EMPLOYEE'S RELIEF FUND					NONE	180				
100 INDIANA AVE. NW										
WASHINGTON DC 20001										

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Relationship to Org	Description of Property	Class of Activity			BV Explantn	FMV Explantn
				Cash Contrib	NonCash Contrib	Book Value		
PREVENT CHILD ABUSE AMERICA			NONE	\$ 104	\$			
PRIME TIME			NONE	3,000				
PUBLIC RADIO INTERNATIONAL			NONE	390				
PUBLIX DONOR DIRECTED FUNDS			NONE	15,100				
RAILS TO TRAILS CONSERVANCY			NONE	7,096				
2545 BLAIRSTONE PINES DRIVE TALLAHASSEE FL 32301								
RAINFOREST ALLIANCE			NONE	330				
REACH OUT AND READ, INC.			NONE	618				
READING IS FUNDAMENTAL			NONE	478				
REBUILDING TOGETHER, INC.			NONE	195				
REFUGE HOUSE OF LEON COUNTY PO BOX 20910 TALLAHASSEE FL 32316			NONE	806				
RESEARCH TO PREVENT BLINDNESS, INC.			NONE	2,165				
RONALD MCDONALD HOUSE CHARITIES			NONE	650				
RONALD MCDONALD HOUSE OF GAINESV			NONE	30,331				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of		Book Value	BV Explantn	FMV Explntn
			Gift	Description of Property			
1600 S.W. 14TH STREET GAINESVILLE FL 32608			\$		\$		\$
RONALD MCDONALD HOUSE OF JAXS 824 CHILDREN'S WAY JACKSONVILLE FL 32207	NONE				234		
RONALD MCDONALD HOUSE OF TAMPA 28 COLUMBIA DRIVE TAMPA FL 33606	NONE				130		
ROOTERVILLE SANCTUARY INC. 9404 SW 132ND STREET ARCHER FL 32618	NONE				2,568		
SAFE HARBOR BOYS' HOME SAINT FRANCIS HOUSE PO BOX 12491 GAINESVILLE FL 32604	NONE				313		
SALVATION ARMY SALVATION ARMY OF CLAY COUNTY	NONE				78,173		
					40,957		
					2,178		

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
SAMARITAN'S PURSE				NONE					
					\$ 2,004	\$			
SANTA FE COMM. COLLEGE PRESIDENT'S				NONE	2,000				
SAVE AMERICA'S FORESTS FUND				NONE	1,040				
SAVE THE CHILDREN				NONE	595				
SAVE THE MANATEE CLUB				NONE	259				
SCLERODERMA FOUNDATION, INC.				NONE	300				
12 KENT WAY, SUITE 101									
BYFIELD MA 1922									
SHANDS PT EMERGENCY FUND				NONE	8,519				
P.O. BOX 100306									
GAINESVILLE FL 32610									
SHRINERS HOSPITALS FOR CHILDREN				NONE	1,508				
12502 N. PINE DRIVE									
TAMPA FL 33612									
SICKLE CELL ASSOCIATION OF FLORIDA-				NONE	4,137				
SICKLE CELL DISEASE ASN. AMER				NONE	156				
SIERRA CLUB FOUNDATION, THE				NONE	154				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

<u>Name Address</u>	<u>Relationship to Org</u>	<u>Class of Activity</u>	<u>Cash Contrib</u>	<u>NonCash Contrib</u>	<u>Book Value</u>	<u>BV Explantn</u>	<u>FMV Explantn</u>
<u>Date of Gift</u>	<u>Description of Property</u>						
			\$	130	\$		
				195			
				485			
SOCIETY OF ST. VINCENT DE PAUL COUN	NONE						
4210 77TH STREET EAST							
PALMETTO FL 34221							
SOUTHERN POVERTY LAW CENTER	NONE			112			
SPECIAL OLYMPICS FLORIDA, INC.	NONE			496			
8 BROADWAY, SUITE D							
KISSIMMEE FL 34741							
SPECIAL OPERATIONS WARRIOR FOUNDATI	NONE			184			
PO BOX 14385							
TAMPA FL 33690							
ST. JUDE CHILDREN'S RESEARCH HOSPIT	NONE			708			
ST. THOMAS UNIVERSITY - ANNUAL FUND	NONE			5,000			
STARLIGHT STARBRIGHT CHILDREN'S FOU	NONE			255			
STOP! CHILDREN'S CANCER, INC.	NONE			9,388			
2632 NW 43RD STREET, A-108							

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
GAINESVILLE FL 32606					\$	\$	\$		
STUDENT CONSERVATION ASSOC.	NONE				130				
SUNSHINE FOUNDATION	NONE				130				
5400 CR 547 N									
DAVENPORT FL 33837									
TEEN CHALLENGE OF FLORIDA	NONE				517				
THE ACTION NETWORK (UWC-UNAFF.)	NONE				1,092				
P.O. BOX 5246									
GAINESVILLE FL 32627									
THE ALS ASSOCIATION FLORIDA CHAPTER	NONE				2,404				
THE CHILDREN'S TABLE	NONE				480				
P.O. BOX 186									
ARCHER FL 32618									
THE LEUKEMIA & LYMPHOMA SOCIETY OF	NONE				7,025				
THE SHARING CENTER	NONE				205				
THE VOLUNTEER CENTER OF N.C.F.	NONE				1,353				
6031 NW 1 PL									

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Date of Gift	Relationship to Org	Class of Activity			BV Explantn	FMV Explantn
			Description of Property	Cash Contrib	NonCash Contrib		
GAINESVILLE FL 32607				\$	\$		
THREE RIVERS LEGAL SERVICES		NONE		30,440			
901 NW 8TH AVE SUITE D5							
GAINESVILLE FL 32601							
THURGOOD MARSHALL SCHOLARSHIP FUND		NONE		516			
90 WILLIAM ST., SUITE 1203							
NEW YORK NY 10038							
TRANSAFRICA FORUM, INC.		NONE		130			
TRANSITIONAL LIVING OF NORTH CENTRA		NONE		4,212			
TRI-COUNTY PREGNANCY CENTER		NONE		1,000			
P.O. BOX 743							
WILLISTON FL 32696							
TWANA TWITU, INC.		NONE		130			
UNICEF, UNITED STATES FUND FOR		NONE		104			
UNITED CEREBRAL PALSY OF FLORIDA		NONE		144			
UNITED METHODIST COMMUNITY RELIEF		NONE		130			
UNITED NEGRO COLLEGE FUND		NONE		573			

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

<u>Name Address</u>	<u>Relationship to Org</u>	<u>Class of Activity</u>	<u>Date of Gift</u>	<u>Description of Property</u>	<u>Cash Contrib</u>	<u>NonCash Contrib</u>	<u>Book Value</u>	<u>BV Explantn</u>	<u>FMV Explantn</u>
8260 WILLOW OAKS CORPORATE DRIVE FAIRFAX VA 220314511					\$	\$	\$		
UNITED SERVICE ORGANIZATION, INC. 2111 WILSON BLVD, SUITE 1200 ARLINGTON VA 22201	NONE				260				
UNITED WAY FOR THE GREATER NEW ORLE UNITED WAY INTERNATIONAL					130				
UNITED WAY OF AMERICA 701 NORTH FAIRFAX STREET ALEXANDRIA VI 22314					108				
UNITED WAY OF BRADFORD COUNTY UNITED WAY OF BROWARD COUNTY					200				
1300 SOUTH ANDREWS AVENUE FORT LAUDERDALE FL 33316					9,870				
UNITED WAY OF CITRUS COUNTY P.O. BOX 1379 CRYSTAL RIVER FL 32623					325				
					221				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

<u>Name Address</u>	<u>Relationship to Org</u>	<u>Class of Activity</u>	<u>Date of Gift</u>	<u>Description of Property</u>	<u>Cash Contrib</u>	<u>NonCash Contrib</u>	<u>Book Value</u>	<u>BV Explantn</u>	<u>FMV Explantn</u>
UNITED WAY OF CLAY COUNTY PO BOX 41428 JACKSONVILLE FL 322031428					\$ 2,262	\$	\$		
UNITED WAY OF DIXIE COUNTY					363				
UNITED WAY OF GILCHRIST COUNTY					466				
UNITED WAY OF HILLSBOROUGH COUNT P.O. BOX 172249 TAMPA FL 336720249					130				
UNITED WAY OF LEVY COUNTY					2,111				
UNITED WAY OF MARION COUNTY PO BOX 1086 OCALA FL 344781086					4,748				
UNITED WAY OF NORTHEAST FLORIDA P.O. BOX 31429 TAMPA FL 336313429					2,116				
UNITED WAY OF PUTNAM COUNTY P.O. BOX 981					2,418				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

Name Address	Relationship to Org	Class of Activity	Date of Gift	Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
PALATKA FL 32178					\$	\$	\$		
UNITED WAY OF SUWANNEE VALLEY					5,552				
325 NE HERNANDO AVE									
LAKE CITY FL 32055									
UNITED WAY OF UNION COUNTY					780				
US ARMY WARRANT OFFICERS ASSOC.	NONE				104				
462 HERNDON PARKWAY, SUITE 207									
HERNDON VA 201705232									
VEGAN OUTREACH	NONE				130				
VETERANS OF FOREIGN WARS FOUND.	NONE				166				
VETSPACE	NONE				47,849				
PO BOX 452									
GAINESVILLE FL 32602									
VIET BLIND CHILDREN'S FOUNDATION	NONE				304				
VISION IS PRICELESS COUNCIL, INC.	NONE				198				
1820 BARRS STREET									
JACKSONVILLE FL 32204									

Federal Statements

Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)

Name Address	Relationship to Org	Class of Activity	Date of Gift		Description of Property	Cash Contrib	NonCash Contrib	Book Value	BV Explantn	FMV Explantn
VIVID VISIONS					NONE	\$ 156	\$			
PO BOX 882										
LIVE OAK FL 32060										
WATER FOR PEOPLE					NONE	166				
WILDLIFE FOUNDATION OF FLORIDA					NONE	167				
P.O. BOX 11010										
TALLAHASSEE FL 32302										
WINN DIXIE HOPE LODGE					NONE	210				
C/O AMERICAN CANCER SOCIETY										
GAINESVILLE FL 326081417										
WOMEN FOR WOMEN INTERNATIONAL					NONE	1,040				
WOMEN IN MILITARY SERVICE FOR AMERI					NONE	234				
WOMEN'S RESOURCE CENTER					NONE	312				
912 NW 13TH ST.										
GAINESVILLE FL 32601										
WORLD EMERGENCY RELIEF					NONE	260				
WORLD ORPHANS					NONE	130				

Federal Statements**Statement 3 - Form 990, Part II, Line 22b - Other Grants and Allocations (continued)**

<u>Name Address</u>	<u>Date of Gift</u>	<u>Description of Property</u>	<u>Relationship to Org</u>	<u>Cash Contrib</u>	<u>Class of Activity</u>	<u>NonCash Contrib</u>	<u>Book Value</u>	<u>BV Explntn</u>	<u>FMV Explntn</u>
WORLD WILDLIFE FUND		NONE							
				\$ 456		\$			
WOUNDED WARRIOR PROJECT (WWP, INC.)		NONE		150					
WYCLIFFE BIBLE TRANSLATORS		NONE		130					
TOTAL OF ORGANIZATIONS				7,488					
WITH A GRANT \$100 OR LESS									
TOTAL				<u>\$ 2,948,942</u>		<u>\$ 0</u>	<u>\$ 0</u>		

Federal Statements

Statement 4 - Form 990, Part II, Line 23 - Specific Assistance to Individuals

<u>Description</u>	<u>Amount</u>
PUBLIX EMPL ASSISTANCE FUND	\$ 3,574
TOTAL	\$ <u>3,574</u>

Federal Statements**Statement 5 - Form 990, Part II, Line 25a - Compensation of Current Officers**

<u>Name</u>	<u>Program Services</u>	<u>Management & General</u>	<u>Fundraising</u>
EXPENSES	\$	\$	\$
KAREN BRICKLEMYER COMPENSATION	23,805	23,805	47,611
TOTAL	\$ <u>23,805</u>	\$ <u>23,805</u>	\$ <u>47,611</u>

Federal Statements**Statement 6 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
EXPENSES				
AWARDS	1,117			1,117
BAD DEBTS	855		855	
BUILDING MAINTENANCE	1,753	563	533	657
CONTRACT - LOANED EXECUTIVES F	15,000			15,000
GAIN ON SALE	997	997		
GRANT WRITING	1,325	1,325		
IN-KIND DONATION EXPENSE	4,175	4,175		
INSURANCE	60,510	25,547	15,654	19,309
SPECIAL EVENTS	12,402			12,402
STATE AFFILATE	6,932		6,932	
STRATEGIC PLAN & COMMUNITY NE	32,858		32,858	
SUCCESS BY SIX	66,169	66,169		
TOTAL	<u>\$ 204,093</u>	<u>\$ 98,776</u>	<u>\$ 56,832</u>	<u>\$ 48,485</u>

Statement 7 - Form 990, Part III - Organization's Primary Exempt Purpose

THE UNITED WAY WAS ORGANIZED FOR THE PURPOSE OF ASSESSING THE HUMAN SERVICES NEEDS OF THE COMMUNITY AND DEVELOPING, THROUGH VOLUNTARY AND GOVERNMENTAL SUPPORT, THE FINANCIAL RESOURCES REQUIRED TO MEET THOSE NEEDS. THE UNITED WAY ALSO OPERATED AN INFORMATION AND REFERRAL PROGRAM TO DIRECT CALLERS TO APPROPRIATE AGENCIES.

Federal Statements**Statement 8 - Form 990, Part IV, Line 54a - Publicly Traded Securities**

Description	Beginning of Year	End of Year	Basis of Valuation
US AND STATE GOVERNMENT CORPORATE STOCK	\$	\$	
VANGUARD ASSET ALLOCATION FUND ADMIRAL SHARES	608,751		MARKET
CORPORATE BONDS			
TOTAL	<u>\$ 608,751</u>	<u>\$ 0</u>	

Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
BUILDING	\$ 325,316	\$	\$ 330,629	\$
OFFICE FURNITURE AND FIXTURE	244,614	235,118	242,865	261,788
DEPRECIATION EXPENSE IS COMPUTED USING THE STRAIGHT LINE METHOD OVER THE ANTICIPATED USEFUL LIVES OF THE ASSETS, WHICH RANGE FROM THREE TO THIRTY NINE YEARS. DEPRECIATION EXPENSE IS \$36,867				
LAND	136,000		136,000	
TOTAL	<u>\$ 705,930</u>	<u>\$ 235,118</u>	<u>\$ 709,494</u>	<u>\$ 261,788</u>

Statement 10 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
OTHER ACCOUNTS RECEIVABLE	\$	\$ 1,702
TOTAL	<u>\$ 0</u>	<u>\$ 1,702</u>

Federal Statements**Statement 11 - Form 990, Part IV, Line 65 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
DESIGNATIONS PAYABLE	\$ 1,154,447	\$ 1,154,185
COMPENSATED ABSENCES	19,507	26,899
TOTAL	<u>\$ 1,173,954</u>	<u>\$ 1,181,084</u>

Federal Statements**Statement 12 - Form 990, Part IV-A - Other Revenue Included on Return**

Description	Amount
LOSS ON DISPOSAL OF EQUIPMENT	\$ 1,002
DONOR CHOICE DONATIONS	1,294,848
TOTAL	\$ <u>1,295,850</u>

Statement 13 - Form 990, Part IV-B - Other Expenses included on Return

Description	Amount
LOSS ON DISPOSAL OF EQUIPMENT	\$ 1,002
DONOR CHOICE DONATIONS	1,294,848
TOTAL	\$ <u>1,295,850</u>

Federal Statements**Statement 14 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
KAREN BRICKLEMYER 10009 SW 44TH LANE GAINESVILLE FL 32608	PRESIDENT	40	95,221	0	0
JANE ADAMS PO BOX 113157 GAINESVILLE FL 32611	BOARD MEMBER	1	0	0	0
RUSSELL BLACKBURN PO BOX 490 GAINESVILLE FL 32602	BOARD MEMBER	1	0	0	0
CYNTHIA MOORE CHESTNUT PO BOX 2877 GAINESVILLE FL 32602	BOARD MEMBER	1	0	0	0
ROLAND DANIELS 3737 NORTH MAIN STREET GAINESVILLE FL 32609	V BOARDCHAIR	1	0	0	0
BEN I DOERR, JR PO BOX 1616 GAINESVILLE FL 32602	SEC/TREA	1	0	0	0
JAMES DOUGHTON 2700 SW 13TH STREET GAINESVILLE FL 32608	BOARD MEMBER	1	0	0	0
EVELYN FOXX 1601 SE 13TH PLACE GAINESVILLE FL 32608	BOARD MEMBER	1	0	0	0
COL EMERY GAINNEY PO BOX 1210 GAINESVILLE FL 32602	BOARD MEMBER	1	0	0	0

Federal Statements**Statement 14 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
MICHAEL GALLAGHER PO BOX 749 GAINESVILLE FL 32606	BOARD MEMBER	1	0	0	0
JON GARDNER 2627 NW 43RD STREET GAINESVILLE FL 32606	BOARD MEMBER	1	0	0	0
DENNY GIES 3130 NW 52ND PLACE GAINESVILLE FL 32605	BOARD CHAIR	1	0	0	0
LUCY GODDARD TEEL PO BOX 390 MAIL SORT 3 GAINESVILLE FL 32602	BOARD MEMBER	1	0	0	0
ERIC GODET PO BOX 2650 ALACHUA FL 32616	AT LARGE	1	0	0	0
TIM GOLDFARB 1600 SW ARCHER ROAD, STE 10-217 GAINESVILLE FL 32608	CAMP CHAIR	1	0	0	0
JOE S HICE JR PO BOX 113156 GAINESVILLE FL 32611	BOARD MEMBER	1	0	0	0
SANDY HOLLINGER 620 E UNIVERSITY AVE GAINESVILLE FL 32601	AG REL CHAIR	1	0	0	0
BRIAN HUTCHISON PO BOX 2650 ALACHUA FL 32616	BOARD MEMBER	1	0	0	0

Federal Statements**Statement 14 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
TOM MALLINI PO BOX 5278 GAINESVILLE FL 32602	PAST CHAIR	1	0	0	0
HELEN MIYASAKI PO BOX 1466 GAINESVILLE FL 32602	BOARD MEMBER	1	0	0	0
MELISSA JAY MURPHY PO BOX 357399 GAINESVILLE FL 32635	BOARD MEMBER	1	0	0	0
ED POPPELL PO BOX 113100 GAINESVILLE FL 32611	BOARD MEMBER	1	0	0	0
JOHN QUINLIVAN PO BOX 147006 GAINESVILLE FL 32614	BOARD MEMBER	1	0	0	0
ELIZABETH REYES PO BOX 357631 GAINESVILLE FL 32635	COMM CHAIR	1	0	0	0
JEFF ROMMEL 3300 SW WILLISTON ROAD GAINESVILLE FL 32608	BOARD MEMBER	1	0	0	0
JACKSON N SASSER 3000 NW 83RD SREET GAINESVILLE FL 32606	BOARD MEMBER	1	0	0	0
KIMBERLY SHAW PO BOX 100165 GAINESVILLE FL 32610	BOARD MEMBER	1	0	0	0

Federal Statements**Statement 14 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
JIM STRINGFELLOW 7824 SW 43RD DRIVE GAINESVILLE FL 32608	BOARD MEMBER	1	0	0	0
JAMES SURRENCY 310 NW 11TH AVE TRENTON FL 32693	BOARD MEMBER	1	0	0	0
ELMIRA K WARREN 218 SE 24TH STREET GAINESVILLE FL 32641	BOARD MEMBER	1	0	0	0
FREDDIE WEBBE 2102 SW 13TH ST GAINESVILLE FL 32608	BOARD MEMBER	1	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0

Federal Statements**Statement 15 - Form 990, Part VII, Line 103 - Other Revenue**

<u>Description</u>	<u>Business Code</u>	<u>Unrelated Amount</u>	<u>Exclusion Code</u>	<u>Exclusion Amount</u>	<u>Related Income</u>
2-1-1 REVENUE		\$		\$	\$ 5,131
SPIRIT OF COMMUNITY					473
EDUCATIONAL SUMMIT					2,040
FINALE- CELEBRATION OF SUCE					3,290
SATELLITE TELEPHONE					2,500
OTHER REVENUE					1,015
TOTAL		\$		\$	\$ 14,449

Statement 16 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	<u>Description</u>
93A	COSTS INCURRED FOR ALLOCATING DONOR DESIGNATED DONATIONS
103A	INFORMATION AND REFERRAL SYSTEM TO CONNECT TO UNITED WAY
103B	SOC - FUNDS ARE FOR A DISCUSSION OF ISSUES OF UNITED WAY
103C	FUNDS ARE FOR A GROUP SUMMITT TO DECIDE ON SPECIFIC GOALS
103D	FUNDS ARE FOR A CELEBRATION FOR ORGANIZATIONS SUCCESS
103E	FUNDS RECEIVED FOR SATELLITE TELEPHONE

Federal Statements**Statement 17 - Schedule A, Part IV-A, Line 22 - Other Income**

<u>Description</u>	<u>2005</u>	<u>2004</u>	<u>2003</u>	<u>2002</u>
	\$ <u>3,665</u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
TOTAL	\$ <u>3,665</u>	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>