

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
2012
 Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

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

C Name of organization: United Way of Baytown Area
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address):
PO Box 425
 Room/suite
 City or town, state or country, and ZIP + 4: Baytown, TX 77522 E Telephone number: (281) 424-5922
D Employer identification number: 74-1255656 **G** Gross receipts \$ 3,276,289

F Name and address of principal officer:

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527
J Website: www.unitedwaybaytownarea.org

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

K Form of organization: Corporation Trust Association
 Other ▶ **L** Year of formation: 1946 **M** State of legal domicile: TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Develop, promote and support solutions designed to meet targeted community needs. The organization does this by its own initiatives, as well as by helping to fund agencies that meet health & human service needs.

2 Check this box

3 Number of voting members of the governing body (Part VI, line 1a)	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	15
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	6
6 Total number of volunteers (estimate if necessary)	
7a Total unrelated business revenue from Part VIII, column (C), line 12	0

	7b	
	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	2,973,047	3,232,988
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,607	3,629
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	957	2,668

Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) **2,977,611** **3,239,285**

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) **3,401,285** **2,742,272**

14 Benefits paid to or for members (Part IX, column (A), line 4) **0**

Activities & Governance

Revenue

Expenses

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

201,463	208,761
	0
126,314	121,965
3,729,062	3,072,998

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) 224,855

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19

Revenue less expenses. Subtract line 18 from line 12

-751,451 166,287

Net Assets or Fund Balances		
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	3,338,699	3,318,867
21 Total liabilities (Part X, line 26)	2,853,180	2,667,061
22 Net assets or fund balances. Subtract line 21 from line 20	485,519	651,806

Part II

Signature Block

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

Sign Here

Signature of officer: David Mohlman, Executive Director
Date: 2013-09-20

Print/Type preparer's name: James A Giroir, CPA
Preparer's signature: James A Giroir
Date: [blank]
Check if self-employed
PTIN: P00184430
Firm's name: James A Giroir CPA
Firm's address: 6003 John Martin Road Suite 300, Baytown, TX 77521-0706
Phone no.: (281) 421-9777

Paid Preparer Use Only

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No
For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2012) Page 2

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

Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: Develop, promote and support solutions designed to meet targeted community needs. The organization does this by its own initiatives, as well as by helping to fund agencies that meet health & human service needs.

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

If "Yes," describe these new services on Schedule O. Yes No

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

If "Yes," describe these changes on Schedule O. Yes No

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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,742,272 including grants) (Revenue \$)

Funding to targeted community impact p in support of initiatives to increase the p children who enter Kindergarten with agr development. Funding to traditional Unit agencies & programs in support of an arr and human service programs, such as di physical & vocational outpatient therapy services, youth mentoring and character family and individual counseling, service; domestic violence and sexual assault, ou dependency treatment, affordable early i emergency food, rent & utility assistance low-income children, services for the hor services for low-income persons, and me senior adults.

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

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

4d Other program services (Describe i (Expenses \$ including grants of \$)

4e Total program service expense:

Part IV Checklist of Required Schedules

		YES	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	
No	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	
No	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	
	4 No 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	6	
5	No		
	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	7	
6	No		
	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	8	
7	No 8		
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	
			No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; 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	
			No
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	
No	11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
	a		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		
11a	Yes 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	No c		
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		
11c	No d		
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		
11d	Yes e		
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		
11e	Yes f		
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes

b Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* **12b**

13 Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*
 No **13** **14a**

Did the organization maintain an office, employees, or agents outside of the United States? **14a** No

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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**
 No

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**
 No **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**
 No **17**

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)* **17** No
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** No
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** No
20a

Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* **20a** No
b

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? **20b**

Part IV Checklist of Required Schedules (continued) **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** Yes **22**

Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* **22** No

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J* **23**
 No **24a**

Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25* **24a** No
b

Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? **24b** No
c

Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? **24c** No
d

Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? **24d** No
25a

Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

25a		No
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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		
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26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

No		26
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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

No		
	27	
		No 28

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

a		
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A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

28a		No
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b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

28b		
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c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

28c		No
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29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

29		
		No 30

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

30		No

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

31		No

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

32		No

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		No

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1

34		No

Did the organization have a controlled entity within the meaning of section 512(b)(13)?

35a		No
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b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

35b		
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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

No		
		36

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

No		
	37	
		No 38

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.

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

Statements Regarding Other IRS Filings and Tax Compliance

						Yes	
No	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		1a			4
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		1b			0
	c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				1c	
No	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		2a			6
	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).					
2b	Yes	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?					
3a	No	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.					
3b	No	4a					

At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

4a No

b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

No b

5a

Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5b No

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

5c

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

6a

No b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

6b

7 Organizations that may receive deductible contributions under section 170(c).

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?

7a

No b If "Yes," did the organization notify the donor of the value of the goods or services provided?

7b c

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7c No

d If "Yes," indicate the number of Forms 8282 filed during the year.

7d 0

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

7e

No f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7f No g

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

7g No

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did the organization have members or stockholders? b

Yes **7a** Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

7a Yes **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
7b No **8**

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body? **8a** Yes

b Each committee with authority to act on behalf of the governing body? **8b**

Yes **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

9 No

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

No **10a** Did the organization have local chapters, branches, or affiliates? **10a**

No **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 **11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a**

Did the organization have a written conflict of interest policy? If "No," go to line 13 **12a** Yes

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? **12b** Yes

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done **12c**

Yes **13** Did the organization have a written whistleblower policy? **14**

Yes **13** Yes **14** Did the organization have a written document retention and destruction policy?

Yes **15** Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? **a**

The organization's CEO, Executive Director, or top management official **15a** Yes

b Other officers or key employees of the organization **15b**

No If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? **16a**

No **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 to such arrangements? **16b**

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **18**

Own website Another

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Upon request Other (explain in Schedule O) **19**

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 organization:
Executive Director 5309 Decker Dr Baytown TX 77520 1413 (281) 424-5922

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending within the organization's tax year.

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

2a				
b				
c				
d				
e				
f All other program service revenue .				
g	0			

Total.Add lines 2a-2f ▶

Other Revenue	3	3,629	3,629		
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Investment income (including dividends, interest, and other similar amounts) ▶

4	0				
---	---	--	--	--	--

Income from investment of tax-exempt bond proceeds ▶

5	0				
---	---	--	--	--	--

Royalties ▶

	(i) Real	(ii) Personal			
6a Gross rents	39,672				
b Less: rental expenses	37,004				
c Rental income or (loss)	2,668				
d	2,668			2,668	

Net rental income or (loss) ▶

	(i) Securities	(ii) Other			
7a Gross amount from sales of assets other than investments and other property					
b Less: cost of sales and other expenses					
c					
d	0				

Net gain or (loss)

8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 ▶

b Less: direct expenses ▶					
c	0				

Net income or (loss) from fundraising events ▶

9a Gross income from gaming activities. See Part IV, line 19 ▶

b Less: direct expenses ▶					
c	0				

Net income or (loss) from gaming activities ▶

10a Gross sales of inventory, less returns and allowances ▶

b Less: cost of goods sold ▶					
c	0				

Net income or (loss) from sales of inventory ▶

Miscellaneous Revenue Business Code

11a					
b					
c					
d All other revenue					
e	0				

Total.Add lines 11a-11d ▶

12	3,239,285	3,629		2,668	
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Total revenue. See Instructions. ▶

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

(A) Total expenses

(B) Program service expenses

(C) Management and general expenses

Fu

Table with 16 rows of expense categories and 3 columns for (A), (B), and (C). Includes categories like Grants, Compensation, Payroll taxes, and Advertising.

	4,766	2,566		
17 Travel			6,150	
		6,150		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				0
19 Conferences, conventions, and meetings			7,498	
	4,874	2,624		
20 Interest			0	
21 Payments to affiliates			30,012	
		30,012		
22 Depreciation, depletion, and amortization				0
23 Insurance				4,862
	3,160	1,702		
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.)				
a Supplies			3,811	
	2,477	1,334		
b Telephone and Networks			7,615	
	1,295	6,320		
c Equipment Rental & Maintenance			9,405	
	2,351	7,054		
d Printing and Publications			28,200	
		28,200		
e All other expenses			5,519	
	2,191	3,328		
25 Total functional expenses. Add lines 1 through 24e			3,072,998	2,742,272
			105,871	224,855
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Form 990 (2012)

Form 990 (2012)

Part X Balance Sheet

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

Assets	1 Cash <input type="checkbox"/> non-interest-bearing	1,169,951	1	1,163,950
	2 Savings and temporary cash investments		2	0
	3 Pledges and grants receivable, net	1,075,684	3	1,238,804
	4 Accounts receivable, net		4	0
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
	7 Notes and loans receivable, net		7	0
	8 Inventories for sale or use		8	0
	9 Prepaid expenses and deferred charges	100	9	5,639

(A)
Begin
of y

10a 184,349

b	Less: accumulated depreciation	10b	95,581	93,272	10c	88,768
11	Investments—publicly traded securities	11				0
12	Investments—other securities. See Part IV, line 11	12				0
13	Investments—program-related. See Part IV, line 11	13				0
14	Intangible assets	14				0
15	Other assets. See Part IV, line 11	15	999,692			821,706
16	Total assets. Add lines 1 through 15 (must equal line 34)	16	3,338,699			3,318,867
Liabilities	17 Accounts payable and accrued expenses	17		2,370		5,411

18	Grants payable		2,841,910	18		2,651,306
19	Deferred revenue			19		
20	Tax-exempt bond liabilities			20		
21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22		
23	Secured mortgages and notes payable to unrelated third parties			23		
24	Unsecured notes and loans payable to unrelated third parties			24		
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule		8,900	25		10,344
26	Total liabilities. Add lines 17 through 25		2,853,180	26		2,667,061

Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		485,519	27	651,806
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		485,519	33	651,806
	34	Total liabilities and net assets/fund balances		3,338,699	34	3,318,867

Form 990 (2012)

Part XI Reconciliation of Net Assets

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

1	Form 990, Special Condition Description:		
	Total revenue (must equal Part VIII, column (A), line 12)		
2	Total expenses (must equal Part IX, column (A), line 25)	1	3,239,285
3	Revenue less expenses. Subtract line 2 from line 1	2	3,072,998
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3	166,287
5	Net unrealized gains (losses) on investments	4	485,519

6		5	
Donated services and use of facilities		6	
7		7	
Investment expenses		8	
8		9	
Prior period adjustments		10	651,806
9			
Other changes in net assets or fund balances (explain in Schedule O)			
10			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))			

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

Financial Statements and Reporting

No	1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	Yes
-----------	----------	---	------------

2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		
2a	No	Special Condition Description	

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

- Separate basis Consolidated basis Both consolidated and separate basis

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

b	2b	Yes	
----------	-----------	-----	--

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

- Separate basis Consolidated basis Both consolidated and separate basis

If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

c	2c	Yes	
----------	-----------	-----	--

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

3a	No
-----------	----

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

3b	
-----------	--

Additional Data

[Return to Form](#)

Form **990** (2012)

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

Department of the Treasury
Internal Revenue Service

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
2012

Name of the organization

United Way of Baytown Area

Employer identification number

Part I
Reason for Public Charity Status

(All organizations must complete this part.) See instructions.

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

1

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

2

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)

3

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

4

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in

section 170(b)(1)(A)(iv). (Complete Part II.)

6

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

7

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross

receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of

its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses

acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)

10

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

11

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

a **b** **c** **d** Type I Type II Type III - Functionally integrated Type III - Non-functionally

integrated

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

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

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

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii)

Yes

No

and (iii) below, the governing body of the supported organization?

11g(i)

(ii) A family member of a person described in (i) above?

11g(ii)

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

11a(iii)

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

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

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

Part II

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

Section A. Public Support. Check the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,057,859	125,377	3,101,938	2,973,047	2,518,277	12,776,498
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0
4 Total. Add lines 1 through 3	4,057,859	125,377	3,101,938	2,973,047	2,518,277	12,776,498
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).						0
6 Public support. Subtract line 5 from line 4.						12,776,498

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4.	4,057,859	125,377	3,101,938	2,973,047	2,518,277	12,776,498
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	44,126	11,084	6,345	3,607	3,629	68,791
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).						0
11 Total support (Add lines 7 through 10).						12,845,289
12 Gross receipts from related activities, etc. (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14
99.460 %	
15 Public support percentage for 2011 Schedule A, Part II, line 14	15
99.050 %	

16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

b 33 1/3% support test—2011. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10% facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

b 10% facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

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

Section A. Public Support If you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization,

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
16 Public support percentage from 2011 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18

19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

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

Part IV

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

Facts And Circumstances Test

Explanation

Schedule A (Form 990 or 990-EZ) 2012

Additional Data

[Return to Form](#)

Software ID: 12000229
Software Version: 2012v2.0

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization: United Way of Baytown Area

Employer identification number

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other acco

1 Total number at end of year

Input field for line 1

2 Aggregate contributions to (during year)

Input field for line 2

3 Aggregate grants from (during year)

Input field for line 3

4 Aggregate value at end of year

Input field for line 4

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring private inurement or private benefit? Yes No

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

Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

2a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) 2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Yes No

4 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

1a Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following information: (i) If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following information: (ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

b
Assets included in Form 990, Part X \$

Part III

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

- Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition Loan or exchange programs Yes
 - b Scholarly research Other No
 - c Preservation for future generations 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? 1a

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

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

If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c	
Beginning balance	
1c	
d	
Additions during the year	
1d	
e	
Distributions during the year	
1e	
f	
Ending balance	
1f	

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

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c

Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

Table with columns Yes, No and row 3a(i)

(ii) related organizations

Table with columns 3a(ii) and row b

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

Table with columns 3b and row 4

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

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property

(a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation

Table with columns 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, and Total. Includes values like 175,518, 86,750, 88,768, 8,831.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

Part VII

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

Table with columns (a) Description of security or category, (b) Book value, (c) Method of valuation. Includes rows for Financial derivatives, Closely-held equity interests, and Other.

Part VIII

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

Table with columns (a) Description of investment type, (b) Book value, (c) Method of valuation.

Part IX

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

Table with columns (a) Description, (b) Book value. Includes row (1) Receivable for agency with value 22,094.

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

Table with columns (a) Description of liability, (b) Book value. Includes rows for Federal income taxes and Deferred Income with value 10,344.

Schedule D (Form 990) 2012

Page 4

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1
		2,524,574	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
		2,524,574	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	714,711
c	Add lines 4a and 4b		4c
		714,711	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5
		3,239,285	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1
		2,358,287	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
		2,358,287	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	714,711
c	Add lines 4a and 4b		4c

714,711

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5

3,072,998

Part XIII

Supplemental Information

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

Identifier	Return Reference	Explanation
Part XII, Line 4b	Part XII, Line 4b: Other revenue amounts included on 990 but not included in F/S	Donor Designations \$714711
Part XI, Line 4b	Part XI, Line 4b: Other revenue amounts included on 990 but not included in F/S	Donor Designations \$714711

Schedule D (Form 990) 2012

Additional Data

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Software ID: 12000229
Software Version: 2012v2.0

**Schedule I
(Form 990)**

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

2012

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service
United Way of Baytown Area

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

Employer identification number
74-1255656

**Part I
General Information on Grants and Assistance**

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

**Part II
Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Organization or government	Agency or grantee name, if applicable	Amount of cash grant	(e) Amount of non-cash assistance	(g) Description of non-cash assistance (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
(1) Various Agencies Various Baytown, TX 77521			136,345		
Targeted Community Impact/Day of Ca		0			
(2) Unlimited Visions Aftercare 907 Preston Pasadena, TX 77503	76-0530210		71,000		
Outpatient chemical dependency treatment programs		0			
(3) Targeted Community Impact 5309 Decker Dr Baytown, TX 77520			670,803		
Special Projects for 501C 3 Orgs.		0			
(4) Love INC PO Box 1116 Baytown, TX 77522	76-0319768		56,000		
Assistance with food, clothing, medical needs, documentation		0			
(5) Houston Volunteer Lawyers Progra 712 Main Street Houston, TX 77002	76-0090652		20,000		
Free Legal Advice to qualified		0			
(6) Girl Scouts 3110 Southwest Freeway Houston, TX 77098	74-6001254		55,000		
Educational programs for girls		0			
(7) Family Services of Greater Houston 3815 Monstrose Suite 200 Houston, TX 77006	74-1152613		120,000		
Counseling, parenting & family life skills, marriage education		0			
(8) Delpechin Childrens Center 4950 Memorial Dr Houston, TX 77007	76-0318867		150,250		
Counseling, adoption, foster care, parent education services		0			
(9) Communities in Schools 607 Baker Rd Baytown, TX 77521	76-0454303		125,500		
Drop out prevention program facilitating		0			

Community Resources			
(10) Church Women United Child Care Center 2 Price St Baytown, TX 77521	74-1301898		68,000
	0		
Provides child care to low income families			
(11) Boy Scouts of America 2225 North Loop West Houston, TX 77074	76-0239833		63,037
	0		
Educational & training programs for boy and young women			
(12) Big Brothers & Big Sisters 6437 High Star Houston, TX 77004	74-1148915		36,969
	0		
Adult friendship & guidance for youth ages 6 to 15 years			
(13) Baytown Resource and Assistance Center 5309 Decker Dr Baytown, TX 77520	74-1255631		250,000
	0		
Assistance with food, rent, utilities, and clothing for low			
(14) Baytown Opportunity Center 7 Swalm Center Dr Baytown, TX 77520	74-1303721		85,000
	0		
Assist Mentally Challenged			
(15) Baytown Meals on Wheel 3900 N Main Baytown, TX 77521	32-0247381		130,000
	0		
Provide Meals to Homebound			
(16) Baytown Family YMCA 201 YMCA Dr Baytown, TX 77521	74-1109737		95,000
	0		
Recreation and outreach programs for young people & families			
(17) Bay Area Rehabilitation Center 7 Swalm Center Dr Baytown, TX 77520	74-1303721		210,000
	0		
Outpatient rehabilitation, services to persons with mental di			
(18) Bay Area Homeless Services 3406 Wisconsin St Baytown, TX 77520	76-0034478		213,500
	0		
Shelter and services for homeless individuals and families			
(19) American Red Cross 5309 Decker Dr Baytown, TX 77520	74-1109757		185,868
	0		
Emergency & Transportation Assistanc			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 17

3 Enter total number of other organizations listed in the line 1 table 2

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.

(b) Number of recipients		(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV
Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		Agencies are required to submit annual audit and copy of form 990 each year.

Schedule I (Form 990) 2012

Additional Data

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection
2012

Name of the organization
United Way of Baytown Area

Employer identification number

74-1255656	Identifier	Return Reference	Explanation
	Form 990, Part VI, Line 19	Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	Governing documents, conflict of interest policy, and financial statements all are available to the public upon request during regular business hours (8-5, M-F) at the organization's business location. The Code of Ethics (which includes conflict of interest policy) as well as the Whistleblower Policy, are posted prominently on a wall in the particular office which the public enters first when coming to the business. In addition, the Code of Ethics, Whistleblower Policy and the financial statements (annual report, audit, 990) are posted to the organization's website.
	Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a: Compensation Review & Approval Process - CEO, Top Management	Prior to the beginning of a new fiscal year, the board president annually forwards to each board member a review instrument for evaluation of the CEO. The board president collects and compiles the results of these completed documents. The results are discussed and action is taken by board members to establish CEO compensation during an official board meeting for which minutes are recorded. Among the many factors considered in setting CEO compensation is data compiled and made available by United Way Worldwide on compensation of CEOs and other employees from other United Ways.
	Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	Beyond annual disclosure by board members in writing of any interests that could give rise to conflicts, the current board president is designated as Official Ethics Officer for the purpose of receiving reports and investigating possible breaches of the Code of Ethics (which includes the conflict of interest policy). A licensed attorney not affiliated with United Way is identified as an alternative ethics contact. The names and contact information for both of these persons are included in the Code of Ethics, which is posted on the organization's website and also is prominently displayed and available during regular business hours (8-5, M-F) at the organization's business location. Reports of breaches, or possible breaches, of the Code of Ethics are expected and encouraged by the policy. The policy provides clear guidance as to how breaches, or possible breaches, may be reported.
	Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b: Form 990 Review Process	At the regular monthly board meeting immediately prior to sending of the Form 990 to IRS, the board members review and approve the completed form.
	Form 990, Part VI, Line 6	Form 990, Part VI, Line 6: Explanation of Classes of Members or Shareholder	As defined in the organization's by-laws, each contributor of money or services to the United Way of Baytown Area during the current fiscal year shall be a member of this organization.

Additional Data

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