

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)

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization HEART OF FLORIDA UNITED WAY, INC.		D Employer identification number 59-0808854
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1940 TRAYLOR BLVD.		E Telephone number 407-835-0900
		City or town, state or country, and ZIP + 4 ORLANDO, FL 32804-4714		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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).

Hand I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number **N/A**

G Website: **WWW.HFUW.ORG**

J Organization type (check only one) 501(c) (3) (insert no.) 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.

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **26,112,507.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

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	17,272,168.		
	c Indirect public support (not included on line 1a)	1c	902,720.		
	d Government contributions (grants) (not included on line 1a)	1d	2,319,850.		
	e Total (add lines 1a through 1d) (cash \$ 19,584,352. noncash \$ 910,386.)	1e			20,494,738.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			258,506.
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5			820,704.
	6 a Gross rents SEE STATEMENT 1	6a	112,146.		
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c			112,146.	
7 Other investment income (describe _____)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities	8a			
	4,261,853.	8a			
	b Less: cost or other basis and sales expenses	8b			
	4,225,619.	8b			
c Gain or (loss) (attach schedule)	8c	36,234.			
d Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 2	8d			36,234.	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ 173,303. of contributions reported on line 1b)	9a	29,575.			
b Less: direct expenses other than fundraising expenses	9b	16,289.			
c Net income or (loss) from special events. Subtract line 9b from line 9a SEE STATEMENT 3	9c			13,286.	
10 a 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			134,985.	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			21,870,599.	
Expenses	13 Program services (from line 44, column (B))	13		18,275,466.	
	14 Management and general (from line 44, column (C))	14		1,358,828.	
	15 Fundraising (from line 44, column (D))	15		1,227,111.	
	16 Payments to affiliates (attach schedule) SEE STATEMENT 4	16		171,143.	
	17 Total expenses. Add lines 16 and 44, column (A)	17			21,032,548.
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		838,051.	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		23,122,858.	
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 5	20		<762,923.>	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			23,197,986.

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.

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 \$ 0 • noncash \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 12,040,238 • noncash \$ 800565.) If this amount includes foreign grants, check here <input type="checkbox"/>	12,840,803.	12,840,803.	STATEMENT 7 STATEMENT 8	
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	801,770.	403,452.	213,190.	185,128.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c 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)				
26 Salaries and wages of employees not included on lines 25a, b, and c	1,905,438.	958,914.	506,548.	439,976.
27 Pension plan contributions not included on lines 25a, b, and c	173,178.	81,074.	46,487.	45,617.
28 Employee benefits not included on lines 25a - 27	753,617.	382,825.	180,510.	190,282.
29 Payroll taxes				
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	59,401.	27,561.	14,024.	17,816.
34 Telephone	99,411.	59,412.	15,765.	24,234.
35 Postage and shipping	32,359.	13,861.	13,595.	4,903.
36 Occupancy				
37 Equipment rental and maintenance	64,156.	33,856.	13,547.	16,753.
38 Printing and publications	74,694.	21,621.	12,459.	40,614.
39 Travel				
40 Conferences, conventions, and meetings	49,517.	27,352.	7,899.	14,266.
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	180,970.	11,275.	148,108.	21,587.
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 6	3,826,091.	3,413,460.	186,696.	225,935.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	20,861,405.	18,275,466.	1,358,828.	1,227,111.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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 18	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a SEE STATEMENT 19 	
(Grants and allocations \$ 8,779,718.) If this amount includes foreign grants, check here <input type="checkbox"/>	12,172,352.
b HEART OF FLORIDA UNITED WAY, INC. ALLOWS FOR OPEN DONOR CHOICE WHERE DONORS ARE ALLOWED TO DESIGNATE TO MEMBER AND NON MEMBER AGENCIES AND OTHER UNITED WAYS. 	
(Grants and allocations \$ 4,061,085.) If this amount includes foreign grants, check here <input type="checkbox"/>	4,061,085.
c SEE STATEMENT 20 	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	2,042,029.
d 	
(Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	18,275,466.

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	7,602,807.	45	7,998,807.
	46	Savings and temporary cash investments	1,749,403.	46	1,822,677.
	47 a	Accounts receivable			
		b Less: allowance for doubtful accounts		47c	
	48 a	Pledges receivable	8,701,550.		
		b Less: allowance for doubtful accounts	1,364,607.	48c	7,336,943.
	49	Grants receivable	661,949.	49	678,831.
	50 a	Receivables from current and former officers, directors, trustees, and key employees		50a	
		b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a	Other notes and loans receivable	118,474.		
		b Less: allowance for doubtful accounts		51c	118,474.
	52	Inventories for sale or use	153,548.	52	270,259.
	53	Prepaid expenses and deferred charges	70,491.	53	63,636.
	54 a	Investments - publicly-traded securities		54a	
		b Investments - other securities	STMT 12	54b	3,830,615.
	55 a	Investments - land, buildings, and equipment: basis			
		b Less: accumulated depreciation		55c	
	56	Investments - other	SEE STATEMENT 9	56	1,613,897.
	57 a	Land, buildings, and equipment: basis	6,020,418.		
	b Less: accumulated depreciation	STMT 10	57c	4,266,193.	
58	Other assets, including program-related investments (describe)		58		
59	Total assets (must equal line 74). Add lines 45 through 58	27,285,428.	59	28,000,332.	
Liabilities	60	Accounts payable and accrued expenses	1,007,774.	60	1,215,436.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
		b Mortgages and other notes payable		64b	
	65	Other liabilities (describe)	SEE STATEMENT 11	65	3,586,910.
66	Total liabilities. Add lines 60 through 65	4,162,570.	66	4,802,346.	
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	9,939,612.	67	10,178,150.
	68	Temporarily restricted	12,383,246.	68	12,219,836.
	69	Permanently restricted	800,000.	69	800,000.
	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)	23,122,858.	73	23,197,986.
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	27,285,428.	74	28,000,332.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	17750703.
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	<762,923.>
2	Donated services and use of facilities	b2	687,823.
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	<75,100.>
c	Subtract line b from line a	c	17825803.
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify): SEE STATEMENT 13	d2	4,044,796.
	Add lines d1 and d2	d	4,044,796.
e	Total revenue (Part I, line 12). Add lines c and d	e	21870599.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	17675575.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	687,823.
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify): SPECIAL EVENT EXPENSES	b4	16,289.
	Add lines b1 through b4	b	704,112.
c	Subtract line b from line a	c	16971463.
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify): GRANTS DESIGNATED BY DONOR	d2	4,061,085.
	Add lines d1 and d2	d	4,061,085.
e	Total expenses (Part I, line 17). Add lines c and d	e	21032548.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
JILL GREVI 1940 TRAYLOR BLVD. ORLANDO, FL 32804	VICE PRESIDENT OF FINANCE 50.00	99,432.	31,389.	0.
LARRY OLNES 1940 TRAYLOR BLVD. ORLANDO, FL 32804	VICE PRESIDENT OF COMMUNITY SERVICE 50.00	93,533.	35,461.	0.
LEIGH SMITH 1940 TRAYLOR BLVD. ORLANDO, FL 32804	VICE PRESIDENT OF DEVELOPMENT 50.00	91,638.	24,498.	0.
JOAN NELSON 1940 TRAYLOR BLVD. ORLANDO, FL 32804	VICE PRESIDENT OF COMMUNITY IMPACT 50.00	79,996.	32,939.	0.
JILL HAMILTON 1940 TRAYLOR BLVD. ORLANDO, FL 32804	VICE PRESIDENT OF COMMUNICATIONS 50.00	77,659.	21,905.	0.
SEE ATTACHED LIST OF OFFICERS AND DIRECTORS				

Part VI Other Information (continued)		Yes	No
82 a	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? 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.)	82a	X
	82b		687,823.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	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.	85b	N/A
	c Dues, assessments, and similar amounts from members	85c	N/A
	d Section 162(e) lobbying and political expenditures	85d	N/A
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
	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?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
	b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	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	88a	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	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 \blacktriangleright 0.; section 4912 \blacktriangleright 0.; section 4955 \blacktriangleright 0.		
	b 501(c)(3) and 501(c)(4) organizations. 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	89b	X
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 \blacktriangleright 0.		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization \blacktriangleright 0.		
	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
	f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
	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?	89g	X
90 a	List the states with which a copy of this return is filed \blacktriangleright NONE		
	b Number of employees employed in the pay period that includes March 12, 2007	90b	70
91 a	The books are in care of \blacktriangleright JILL GREVI Telephone no. \blacktriangleright 407-835-0900 Located at \blacktriangleright 1940 TRAYLOR BLVD, ORLANDO, FL ZIP + 4 \blacktriangleright 32804-4714		
	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 \blacktriangleright N/A	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

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

If "Yes," enter the name of the foreign country N/A

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 92 N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a SEE STATEMENT 14					258,506.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	820,704.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	112,146.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	36,234.	
101 Net income or (loss) from special events			01	13,286.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER REVENUE					134,985.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		982,370.	393,491.
105 Total (add line 104, columns (B), (D), and (E))					1,375,861.

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.)

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 (other than by providing funds for such purposes).
▼	SEE STATEMENT 15

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

(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
N/A	%			
	%			
	%			
	%			

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 No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes 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). **N/A**

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.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
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.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
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?

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 _____

Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. X) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 **RSM MCGLADREY, INC.
800 N. MAGNOLIA AVENUE, SUITE 1700
ORLANDO, FL 32803**

EIN _____ Phone no. **407-898-2727**

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization HEART OF FLORIDA UNITED WAY, INC.	Employer identification number 59-0808854
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1940 TRAYLOR BLVD.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ORLANDO, FL 32804-4714	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **JILL GREVI**
Telephone No. ▶ **407-835-0900** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2007**, and ending **JUN 30, 2008**

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization HEART OF FLORIDA UNITED WAY, INC.	Employer identification number 59 0808854
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ROBERT SEEDS 1940 TRAYLOR BLVD., ORLANDO, FL 32804	MIS DIRECTOR 50.00	73,681.	21,165.	
DENNIS BURNS 1940 TRAYLOR BLVD., ORLANDO, FL 32804	RESOURCE DIRECTOR 50.00	63,711.	25,155.	
ASHLEY ROSSER 1940 TRAYLOR BLVD., ORLANDO, FL 32804	OFFICE DIRECTOR 50.00	60,627.	22,771.	
MARTA VARGAS 1940 TRAYLOR BLVD., ORLANDO, FL 32804	GIVING DIRECTOR 50.00	59,849.	18,822.	
RICHARD LAPRATT 1940 TRAYLOR BLVD., ORLANDO, FL 32804	2-1-1 DIRECTOR 50.00	56,479.	17,974.	
Total number of other employees paid over \$50,000 ▶	2			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e	Transfer of any part of its income or assets?	2e	X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) SEE STATEMENT 16	3a	X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X
b	Did the organization make any taxable distributions under section 4966? N/A	4b	
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4c	
d	Enter the total number of donor advised funds owned at the end of the tax year	N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 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 Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 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					▶

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 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.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	19053676.	18860767.	21180311.	16900390.	75,995,144.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	282,034.	229,337.	175,064.	211,716.	898,151.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	682,923.	386,007.	276,190.	267,067.	1,612,187.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	729,298.	112,126.	SEE STATEMENT 17 90,531.	27,957.	959,912.
23 Total of lines 15 through 22	20747931.	19588237.	21722096.	17407130.	79,465,394.
24 Line 23 minus line 17	20465897.	19358900.	21547032.	17195414.	78,567,243.
25 Enter 1% of line 23	207,479.	195,882.	217,221.	174,071.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 1,571,345.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,727,555.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 78,567,243.
d Add: Amounts from column (e) for lines: 18 1,612,187. 19 1,727,555. 22 959,912. 26b 1,727,555.					26d 4,299,654.
e Public support (line 26c minus line 26d total)					26e 74,267,589.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 94.5274%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2006) (2005) (2004) (2003)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2006) (2005) (2004) (2003)					
c Add: Amounts from column (e) for lines: 15 16 17 20					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

N/A

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

		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:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
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:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
34 a	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 11 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

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.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	41	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 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:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

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

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2007

Name of organization

HEART OF FLORIDA UNITED WAY, INC.

Employer identification number

59-0808854

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Name of organization HEART OF FLORIDA UNITED WAY, INC.	Employer identification number 59-0808854
--	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PUBLIX SUPER MARKETS INC <hr/> 3300 PUBLIX CORPORATE PARKWAY <hr/> LAKELAND, FL 33811	\$ 983,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
COMMERCIAL BUILDING, ORLANDO, FL	1	112,146.
TOTAL TO FORM 990, PART I, LINE 6A		<u>112,146.</u>

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
VARIOUS INVESTMENTS	4,261,853.	4,225,619.	0.	36,234.
TO FORM 990, PART I, LINE 8	<u>4,261,853.</u>	<u>4,225,619.</u>	<u>0.</u>	<u>36,234.</u>

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
CHEF'S GALA	202,878.	173,303.	29,575.	16,289.	13,286.
TO FM 990, PART I, LINE 9	<u>202,878.</u>	<u>173,303.</u>	<u>29,575.</u>	<u>16,289.</u>	<u>13,286.</u>

FORM 990	PAYMENTS TO AFFILIATES	STATEMENT	4
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AFFILIATE'S NAME	AFFILIATE'S ADDRESS
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NATIONAL AND STATE ORGANIZATIONS

PURPOSE OF PAYMENT	AMOUNT
PAYMENT OF NATIONAL AND STATE DUES	171,143.

TOTAL TO FORM 990, PART I, LINE 16	171,143.
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FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
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DESCRIPTION	AMOUNT
UNREALIZED GAIN	<762,923.>
TOTAL TO FORM 990, PART I, LINE 20	<762,923.>

FORM 990	OTHER EXPENSES	STATEMENT	6
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DESCRIPTION	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	5,124.	5,124.		
BUILDING MAINTENANCE	88,591.	48,274.	17,086.	23,231.
MARKETING	33,808.	4,500.	6,990.	22,318.
UTILITIES	91,360.	48,397.	18,130.	24,833.
PROFESSIONAL FEES	143,653.	82,392.	53,121.	8,140.
INSURANCE	57,530.	29,677.	12,923.	14,930.
MEMBERSHIP DUES	13,525.	5,700.	5,430.	2,395.
RECRUITING & RELOCATION	6,356.	2,172.	3,375.	809.
MISCELLANEOUS	54,062.	41,134.	11,563.	1,365.
STAFF DEVELOPMENT & TRAINING	33,395.	18,538.	7,915.	6,942.
PROPERTY TAXES	6,420.	2,194.	3,409.	817.
CAMPAIGN EXPENSES	90,836.			90,836.
CASE MANAGEMENT	609,459.	609,459.		
DRUG REIMBURSEMENTS	419,341.	419,341.		
MEDICAL	221,093.	221,093.		

HEART OF FLORIDA UNITED WAY, INC.

59-0808854

ORAL HEALTH CARE	78,944.	78,944.		
NUTRITIONAL COUNSELING	41,706.	41,706.		
MENTAL HEALTH SERVICES	30,189.	30,189.		
SUBSTANCE ABUSE SERVICES-OUTPATIENT	9,720.	9,720.		
FOOD BANK/NUTRITIONAL SUPPLEMENT	218,207.	218,207.		
EMERGENCY ASSISTANCE PROGRAM	1,322,241.	1,322,241.		
STATE AND NATIONAL DUES	39,389.	8,521.	25,858.	5,010.
COMPUTER SUPPLIES & MAINTENANCE	27,849.	10,343.	10,380.	7,126.
SUBSCRIPTIONS AND PUBLICATIONS	2,705.	1,202.	939.	564.
TRANSPORTATION	180,588.	154,392.	9,577.	16,619.
TOTAL TO FM 990, LN 43	<u>3,826,091.</u>	<u>3,413,460.</u>	<u>186,696.</u>	<u>225,935.</u>

FORM 990

CASH GRANTS AND ALLOCATIONS
TO OTHERS

STATEMENT 7

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS

AMOUNT

VARIOUS 501(C)(3) ORGANIZATIONS
ALLOCATIONS TO MEMBER AND NON MEMBER AGENCIES
VARIOUS

7,979,153.

VARIOUS 501(C)(3) ORGANIZATIONS
DESIGNATIONS TO MEMBER AND NON MEMBER AGENCIES
VARIOUS

4,061,085.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B

12,040,238.

FORM 990	NONCASH GRANTS AND ALLOCATIONS	STATEMENT	8
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CLASS OF ACTIVITY: VARIOUS 501(C)(3) ORGANIZATIONS

DONEE'S NAME AND ADDRESS

ALLOCATIONS TO MEMBER AND NON MEMBER AGENCIES
VARIOUS

RELATIONSHIP OF DONEE	DESCRIPTION OF PROPERTY	DATE OF GIFT
NONE	VARIOUS DONATED GOODS	VARIOUS
METHOD USED TO DETERMINE BOOK VALUE		
FAIR MARKET VALUE		
METHOD USED TO DETERMINE FAIR MARKET VALUE	BOOK VALUE	AMOUNT GIVEN
ESTIMATED BULK FAIR MARKET VALUE	0.	800,565.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22B		800,565.

FORM 990	OTHER INVESTMENTS	STATEMENT	9
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DESCRIPTION	VALUATION METHOD	AMOUNT
INVESTMENTS AT COMMUNITY FOUNDATION	MARKET VALUE	1,613,897.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		1,613,897.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	10
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE & EQUIPMENT	549,626.	424,242.	125,384.
VEHICLES	17,884.	17,884.	0.
COMPUTER EQUIPMENT	418,425.	279,156.	139,269.
BUILDING	4,759,483.	1,032,943.	3,726,540.
LAND	275,000.	0.	275,000.
TOTAL TO FORM 990, PART IV, LN 57		1,754,225.	4,266,193.

FORM 990	OTHER LIABILITIES	STATEMENT 11
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DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
CAMPAIGN PLEDGES DUE TO OTHER UNITED WAY ORGANIZATIONS	254,608.	197,686.
CAMPAIGN PLEDGES DUE TO DESIGNATED AGENCIES	2,900,188.	3,389,224.
TOTAL TO FORM 990, PART IV, LINE 65	3,154,796.	3,586,910.

FORM 990	OTHER SECURITIES	STATEMENT 12
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SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
MONEY MARKETS	FMV	33,662.
MUTUAL FUNDS	FMV	3,796,953.
TO FORM 990, LINE 54B, COL B		3,830,615.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT 13
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DESCRIPTION	AMOUNT
REVENUES DESIGNATED BY DONOR	4,061,085.
SPECIAL EVENT EXPENSES	<16,289.>
TOTAL TO FORM 990, PART IV-A	4,044,796.

FORM 990	PROGRAM SERVICE REVENUE	STATEMENT 14
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DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
SPONSORSHIPS					14,900.
WORKSHOPS					2,829.
GIFT IN KIND PROGRAM					40,502.
MANAGEMENT FEES					112,191.
DIRECTORY FEES					657.
SERVICE FEES					87,427.
TO FORM 990, PART VII, LINE 93					258,506.

Heart of Florida United Way, Inc.

EIN: 59-0808854

June 30, 2008

Part II, Line 22 Grants and Allocations (Cash Allocations)

	<u>Total Allocations</u>	<u>Total Designations</u>
Adult Literacy League	18,135.12	18,718.22
Alzheimer's Resource Center	5,036.88	104,182.62
American Red Cross	355,653.10	203,459.70
Arnold Palmer Hospital	122,748.12	3,154.05
BETA Center, Inc.	262,900.74	89,001.22
Big Brothers /Big Sister	5,711.40	56,540.34
Boy Scouts of America	19,042.37	202,539.16
Boys & Girls Club	614,979.12	125,124.12
Catholic Charities	652,558.22	171,828.60
Center for Drug Free Living	308,662.90	44,345.63
Center for Independent Living	64,733.80	17,567.65
Central Florida Police Athletic	74,195.74	8,377.16
Central Florida YMCA	404,233.33	47,958.80
Children's Home Society	212,608.67	62,396.81
Christian Service Center	20,808.03	39,188.78
Coalition for the Homeless	265,070.31	105,326.82
Community Coordinated Care for Children	457,868.32	16,688.43
Community Health Center	105,418.91	4,908.76
Community Service Center	249,701.97	4,726.06
Consumer Credit Counseling Services	30,233.77	2,874.85
Devereux Foundation Treatment Network	121,068.73	8,793.97
Edgewood Children's Ranch	59,061.06	59,231.92
Family Emergency Fund	0.00	113,574.59
Foster Grandparents Program	45,221.10	7,650.99
Girl Scouts of Citrus Council	84,839.27	39,968.22
Good Samaritan Home	0.00	1,453.27
Grove Counseling Center	65,211.56	3,417.08
GROWS Literacy Council	19,373.39	1,920.07
Guardian Care Convalescent Center	61,628.06	4,529.48
Harbor House	98,683.85	78,785.69
Healthcare Center for Homeless	94,430.31	17,221.46
Help NOW Osceola	86,955.93	6,943.05
Jewish Community Center	49,964.62	18,345.52
Jewish Family Services	115,397.56	23,344.22
Justice & Peace Office	28,607.93	397.42
Kids House of Seminole	26,178.91	5,883.88
Lakeside Alternatives	55,004.10	9,854.84
Legal Aid Society of Orange County	27,177.97	11,323.69
LifeLine of Central Florida	176,637.94	5,259.24
Lighthouse Central Florida	93,113.37	19,277.01
Lisa Merlin House	0.00	713.21
Living Hope International Ministry	18,490.42	4,852.80
MADD	14,358.67	15,943.80
Meals on Wheels	31,239.77	57,719.97
Mental Health Association	47,983.01	23,014.38
Metropolitan Orlando Urban League	84,580.95	11,279.13
Mustard Seed	34,636.22	39,254.20
Orlando Day Nursery	122,048.05	7,987.54
Osceola County Council on Aging	162,355.61	25,249.40
Osceola A.R.C., Inc.	31,952.08	13,562.22

Heart of Florida United Way, Inc.

EIN: 59-0808854

June 30, 2008

Statement 20

Part II, Line 22 Grants and Allocations (Cash Allocations)

	<u>Total Allocations</u>	<u>Total Designations</u>
Osceola County Council on Aging	162,355.61	25,249.40
Osceola A.R.C., Inc.	31,952.08	13,562.22
Osceola County Public Health	62,323.68	0.00
Primrose Center	94,480.92	11,776.23
Quest, Inc.	210,615.44	20,394.96
RSVP-Orange	31,945.99	2,863.19
Rescue Outreach Mission	115,896.10	8,291.62
Safehouse of Seminole	86,895.86	16,268.41
Salvation Army-Orlando	311,062.36	58,909.01
Salvation Army-Seminole	61,542.51	19,090.29
Second Harvest Food Bank	168,803.23	70,537.92
Seminole Community Mental Health Center	0.00	597.61
Seminole Community Volunteer Program	25,437.92	817.95
Seminole County Bar Association Legal Aid	39,237.61	1,823.83
Seminole Work Opportunity Program	31,874.51	16,279.45
Seniors First	164,861.36	37,753.36
Share the Care	43,826.97	4,648.45
Shepherd's Promise	18,337.14	7,335.78
S.T.E.P.S.	68,147.33	1,872.77
The Gift of Swimming	27,762.53	858.80
United Cerebral Palsy	9,898.12	23,800.17
Visiting Nurse Association	93,222.09	14,332.42
Welbourne Avenue Nursery	59,837.85	2,278.36
Winter Park Day Nusery	95,940.66	8,776.90
Community Health Charities of Florida	0.00	224,404.73
Non-Member Agencies	50,702.34	362,474.83
Combined Federal Campaign	0.00	648,872.50
Florida State Employees Charitable Campaign	0.00	253,847.50
Other United Ways	0.00	276,517.83
Total United Way allocations to agencies	<u>7,979,153.78</u>	<u>4,061,084.91</u>

Total cash allocations

7,979,153.78

Heart of Florida United Way, Inc.
EIN: 59-0808854
June 30, 2008

Part II, Line 22 Grants and Allocations (Non-Cash Allocations)

Adult Literacy League	\$24.95
Autism Society of Greater Orlando	\$15,950.95
BETA Center Inc.	\$16,230.49
Big Brothers Big Sisters of Central Florida Inc.	\$49.75
Boys & Girls Clubs of Central Florida	\$270.13
Bridges of America	\$6,673.20
CARE Community Outreach Services, Inc	\$9,574.97
Center for Drug Free Living	\$44,016.80
Center for Independent Living in Central Florida Inc., The	\$136.03
Center for Multicultural Wellness & Prevention, Inc.	\$13,486.02
Central Florida Council Boy Scouts	\$321.28
Central Florida Police Athletic League	\$459.94
Christian Help Foundation, Inc.	\$468.96
Christian Sharing Center, The	\$12,138.98
Church of the Messiah (Winter Garden)	\$1,212.84
Covenant House Florida	\$474.51
Early Learning Coalition of Osceola County	\$3,966.71
Family & Friends United Inc.	\$6,987.70
Fisherman of God, Inc.	\$957.92
God's Little Lambs Learning Center Inc.	\$11,788.96
Great Honor House	\$11,608.13
Greater Faith Ministries of God on the Move, Inc.	\$15,920.77
GROWS Literacy Council	\$5,746.33
Harbor House OCCADV	\$4,298.00
Health Masters Club, Inc.	\$737.96
Heart of Frances Inc.	\$19,496.62
Help Your Neighbor	\$2,131.35
Heart of Florida United Way	\$13,515.25
Hispanic Health Initiatives Inc.	\$7,091.47
Hope For All Learning Center	\$150,517.71
Intervention Services Inc.	\$6,710.24
Jesus the Light of Life Outreach Ministry, Inc	\$171,731.63
La Amistad Foundation, Inc.	\$3,446.09
Lakeside Behavioral Healthcare, Inc.	\$10,961.97
Legal Aid Society of the OCBA Inc.	\$479.98
Loving Hands Blind, Elderly & Handicap Seniors, Inc.	\$349.00
Meals on Wheels Etc. Inc.	\$1,132.10
Mending Hearts Charities	\$22,147.95
Mills Institute for Learning & Leadership Services	\$1,615.64
One Accord Outreach Int'l. Church	\$169.58
Open House Customer	\$32,574.81
Orlando After School All Stars	\$6,171.68
Orlando Neighborhood Improvement Center	\$8,253.38
Osceola County Council on Aging	\$11,878.15
Park Place Behavioral Health Care	\$29,981.02
Peabody United Way Partnership	\$22,870.50
Primrose Center Inc.	\$2,184.78
Quest Inc.	\$16,502.31
Rosemont Elementary PTA	\$10,947.45
RSVP of Orange County	\$3,381.79
Second Chance Resource Center	\$2,001.43
Seminole Community Volunteer Program	\$849.07
Seniors First Inc.	\$5,503.47
Shepherd's Promise (Good Shepherd)	\$1,090.77
Spina Bifida Association of Central Florida	\$4,093.36
The Tree of Life Ministries of Orlando, Inc.	\$1,918.28
Therapy 4 Kids	\$508.39
Total Restoration Transformation Center Inc.	\$7,062.68
UCP Child Development Centers	\$8,088.83
Walker Elementary PTA	\$2,009.47
Women's Ministry Disciples of Christ	\$7,473.49
Financial Statement Adjustment	\$20,221.03

Heart of Florida United Way, Inc.
EIN: 59-0808854
June 30, 2008

Part II, Line 22 Grants and Allocations (Non-Cash Allocations)

TOTAL Non Cash paid to Agencies	<u>\$ 800,565.00</u>
Total Cash Allocation	\$ 7,979,153.78
Total Non-Cash Allocation	<u>\$ 800,565.00</u>
Total Allocations	\$ 8,779,718.78

Heart of Florida United Way, Inc.

EIN: 59-0808854

June 30, 2008

Part III-Statement of Program Service Accomplishments

Statement 18

Primary Exempt Purpose

The mission of Heart of Florida United Way is to improve lives by mobilizing the caring power of our communities. This is accomplished by engaging all citizens to work together to build healthy, safe, caring and strong communities.

Statement 19

Line a:

United Way 2-1-1 & Elder Helpline

The United Way 2-1-1 & Elder Helpline received 94,000 calls during 2007-08. Much like 4-1-1 or 9-1-1, this easy-to-remember community resource and referral helpline links those in need with nearly 2,000 assistance programs administered by more than 800 Central Florida health and social service agencies. Answering calls 24 hours per day, highly trained operators make free referrals to help callers find assistance with child and elder care, disabilities, affordable housing, food, rent, Medicare Part D and many other social service issues.

Program Highlights:

- Provided information to nearly 1,000 callers regarding the Earned Income Tax Credit program, in partnership with the Orlando Regional Chamber of Commerce, Orange County and the City of Orlando.
- Continued to maintain the Foster Care Helpline to assist those entering and exiting the foster care network.
- Increased cost efficiency by incorporating volunteer resources in the Call Center. More than 2,000 volunteer hours were donated through June 2008.
- Partnered with the Health Council of Central Florida to provide affordable housing information to residents of Lake, Orange, Osceola and Seminole counties.

United Way Stewardship Program

The Heart of Florida United Way Stewardship Program serves as a fund manager for more than \$1.3 million in direct assistance for a network of emergency assistance agencies. These agencies provide the case work, verify and document needs, determine client eligibility and submit assistance requests for vendor payment processing.

The needs addressed by this program are: (1) providing allocation and expenditure accountability to funders by ensuring that funding guidelines are followed and clients are served confidentially and expeditiously, and (2) preventing duplication of services by providing a centralized database that is accessible to participating agencies, enabling them to view previous assistance history of clients and track fund balances.

Because the top requests for services through United Way 2-1-1 are food, rent and utility assistance, it is essential to have a coordinating program to administer community funds.

Program Highlights:

- Assistance provided to 8,814 individuals in 7,701 households.
- Worked with organizations, foundations, businesses, agencies and donors to increase the funding cap and lessen guidelines to meet rising housing costs and provide assistance to more families.

United Way Volunteer Resource Center

The United Way Volunteer Resource Center (VRC) serves as the gateway to our community's volunteer opportunities. In addition to helping local nonprofit agencies develop, manage and promote opportunities, the center links with all segments of the community with opportunities to get involved.

Program Highlights:

- Organized the 2007 United Way Days of Caring, which was supported by more than 1,500 volunteers who donated more than 8,000 hours to United Way partner agencies. Thirty companies, including Lockheed Martin, Walt Disney Company, Publix Super Markets, Inc., Fifth Third Bank, Marriott Corp. and others participated, resulting in 44 completed projects.
- Referred 895 volunteers to 128 agencies.
- Registered 416 new volunteers with the Center.
- Collaborated with community partners to develop "Highlight My Life," which provides hair, make-up and wardrobe makeovers for low-income women transitioning to the workforce.

United Way Gifts in Kind Center

The United Way Gifts in Kind Center (GIKC) solicits and collects donated merchandise and materials for redistribution to local nonprofit health and human service agencies and school PTAs.

In addition to providing an outlet for tax-deductible business donations, the center provides agencies access to much-needed goods at greatly reduced costs, thereby increasing their economic efficiency — something Heart of Florida United Way continually strives to do.

Program Highlights:

- Distributed \$780,343 worth of donated supplies and materials to local nonprofit organizations.
- Facilitated numerous community “pass-through” donations, which are advertised and given to GIKC member agencies. Donations included 700 new bicycles, office furniture and equipment, home furnishings and roofing supplies.
- Distributed four Young Explorer computer systems, provided by an IBM technology grant and valued at \$8,596, to GIKC member agencies serving youths.

ExtraCredit – Earned Income Tax Credit (EITC) Program

United Way also manages ExtraCredit, which promotes the federal Earned Income Tax Credit (EITC) program that helps put money back into the pockets of hard working families and individuals.

Among other uses, EITC funds can help people increase their financial stability by paying down debt, saving for a home, enrolling in job training programs or covering any basic need

To promote EITC awareness, United Way works with local businesses and nonprofit agencies to reach potential recipients and inform them about program benefits and free tax preparation sites.

Program Highlights:

- HFUW hosted free “Refund Roundup” presentations throughout the community. Reached more than 100 businesses and distributed some 700,000 pieces of educational material.
- Nearly 11,000 people had free tax returns filed by visiting one of 33 tax preparation sites.
- Nearly \$1.8 million in EITC refunds were claimed through returns filed at the free tax preparation sites.

Areas of Care and Lives Touched

From children to seniors to those recovering from disasters, disease or trauma, United Way supported agencies last year made a measurable difference in the lives of 376,939 people.

Agency programs receiving HFUW funding are categorized by areas of care, reflecting the populations they serve and issues they impact. The following are just a few of the highlights from Focused Care Area programs.

Figures are based on data provided by agencies. Not all agencies collect all categories of demographic data for all clients. Therefore, some percentages will not equal 100 percent for total clients served.

Demographic Highlights

- 51.6 percent of clients served by HFUW funded program are between the ages of 1 and 19.
- 26.3 percent of clients served are between the ages of 20 and 54.
- For agencies reporting, 27.2 percent of clients served are single, female heads of households.

Focused Care Areas: Number of People Served & Program Examples

Helping our Children: 26,774 served

- Nearly 1,701 children were served by “A Place For Children,” an Orange County Courthouse daycare program operated by the Children’s Home Society of Florida to assist parents attending to legal matters.
- Some 335 children from Grand Avenue Elementary School were matched with mentors through Devereux Florida’s C.A.F.E. program, part of the West Orlando Washington Shores Initiative.
- Kids In Motion, a Justice & Peace Office program, provided after-school nutrition and basic-skill services for 75 low-income minority children who would otherwise be returning to empty households.

Guiding Our Youth: 42,306 served

- The Boys & Girls Clubs of Central Florida, Inc., provided powerful, positive youth development programs, adult guidance and mentoring to 12,295 disadvantaged children.
- 511 children participated in summer camps, after-school and teen programs hosted by the Jewish Community Center of Greater Orlando, Inc.

Strengthening Our Families: 41,750 served

- BETA Center, Inc., assisted 4,541 at-risk teen mothers with counseling, information, referrals and basic-need provisions.
- 5,963 people received free to reduced-cost legal assistance through the Legal Aid Society of the Orange County Bar Association, Inc.
- Consumer Credit Counseling Service of Central Florida helped 3,017 at-risk clients manage finances and plan for home ownership.

Supporting Our Seniors: 17,507 served

- 4,224 tri-county senior citizens remained vital and active thanks to the Retired & Senior Volunteer Program of Orange County (RSVP).

- 8,706 seniors benefitted from home-delivered and/or group-meal assistance. This program helped 87 percent more seniors compared to the previous reporting period.
- SENIORS FIRST, Inc., and the Osceola Council on Aging, Inc., helped 577 senior feel safer and more secure through home improvement and safety programs.

Turning Disability into Ability: 3,825 served

- The Center for Independent Living in Central Florida, Inc., helped 1,372 disabled residents become more self-sufficient in their daily tasks.
- Lighthouse Central Florida brightened the lives of 559 visually impaired individuals.
- 1,318 people living with disabilities received vocational training through QUEST, Inc.; the Seminole Work Opportunity Program (SWOP); Primrose Center, Inc., and the Osceola Association for Retarded Citizens (ARC).

Providing Emergency Services: 112,183 served

- Catholic Charities of Central Florida, Inc., provided professional casework assistance to 8,404 families experiencing difficulty paying rent, mortgage, utility, transportation, food and medication expenses.
- More than 1,966 individuals accessed shelter assistance through Coalition for the Homeless of Central Florida, Inc.
- Through the American Red Cross Armed Forces Emergency Services program, 1,931 servicemen and women and their families received financial aid and other assistance.

Improving Community Health: 29,121 served

- UCP of Central Florida, Inc., provided training, support and advocacy services to 2,028 disabled children and their families.
- 2,028 individuals received dental exams and/or urgent treatment through the Health Care Center for the Homeless.
- 3,210 children received transitional treatment while awaiting outpatient mental health services through Lakeside Behavioral Healthcare's Children's Assessment and Intervention program.

Statement 20

Line c:

Ryan White Program

The Ryan White Program provided funding to 9 AIDS Service Organizations in Orange, Osceola, Seminole and Brevard counties. With funding totaling over \$1.9 million, much needed services and linkages to care for persons infected with HIV/AIDS were provided in 10 service categories to include: Medical Care, Case Management, Pharmaceutical Assistance, Transportation, Mental Health Services, Home Health Care, Food Baskets, Substance Abuse Services, Nutritional Counseling and Dental Care. Over 3,500 persons infected with this disease were served during the reported period.

Heart of Florida United Way, Inc.

EIN#: 59-0808854

Board of Directors

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. Robert Brown Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	President & CEO 50.00	160,500	38,420	14,400
Mr. Mark Censoprano Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Stephen Fan Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. J. Christian Fenger Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. Donald W. Gately Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. C. Josef Ghosn Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Michael L. Harding Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Ms. Roseann Harrington Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Ms. Stephanie Howell Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Timothy N. Hyslop Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	TREASURER 4.00	NONE	NONE	NONE
Ms. Sherri Keller Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804 Term Expires: 3-yr/Sept. 2010	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Avido Khahaifa Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	SECRETARY 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. Dave Krepcho Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Ms. Jean D'Meza Leuner, PhD, RN Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Patricia Maddox Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Chief Michael McCoy Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. John Moskos Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Sam Pero Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Gary C. Sain Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Kevin A. Sheehan Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. Jacob Stuart Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Keith Swider Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Donna Templin Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Ms. Linda Warren Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
Mr. Richard A. Watkins Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
Mr. Bill Wilson Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD CHAIR 4.00	NONE	NONE	NONE
Mr. Gary Woodrell Heart of Florida United Way 1940 Traylor Boulevard Orlando, FL 32804	BOARD MEMBER 2.50	NONE	NONE	NONE
	GRAND TOTAL	<u>160,500</u>	<u>38,420</u>	<u>14,400</u>

Heart of Florida United Way Overhead Calculation

June 30, 2008

NUMERATOR

Supporting Services:		
Management & General Expenses	Part I, Line 14	1,358,828
Fundraising Expenses	Part I, Line 15	1,227,111
Payments to Affiliates	Part I, Line 16	<u>171,143</u>
Total		<u>2,757,082</u>

DENOMINATOR

Total Revenue	Part I, Line 12	<u>21,870,599</u>
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OVERHEAD RATE **12.61%**