

Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2004 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print of type. See Specific Instructions.	C Name of organization UNITED WAY OF FORSYTH COUNTY, INC.		D Employer identification number 58-1925396
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite P. O. BOX 1350		E Telephone number 770-781-4110
		City or town, state or country, and ZIP + 4 CUMMING, GA 30028		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).

H and 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 ▶
 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

G Website: ▶ WWW.UNITEDWAYFORSYTH.COM

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 1,117,127.

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

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	1,069,153.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 1,069,153. noncash \$)	1d	1,069,153.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4		
	5	Dividends and interest from securities	5	4,685.	
	6a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7	Other investment income (describe ▶)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		8a			
		8b			
		8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	43,289.		
b	Less: direct expenses other than fundraising expenses	9b	21,332.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	SEE STATEMENT 1	21,957.	
10a	Gross sales of inventory, less returns and allowances	10a			
		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			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,095,795.		
Expenses	13	Program services (from line 44, column (B))	13	807,232.	
	14	Management and general (from line 44, column (C))	14	69,614.	
	15	Fundraising (from line 44, column (D))	15	65,953.	
	16	Payments to affiliates (attach schedule)	16	SEE STATEMENT 2	6,046.
	17	Total expenses (add lines 16 and 44, column (A))	17	948,845.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	146,950.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,162,209.	
	20	Other changes in net assets or fund balances (attach explanation)	20	0.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	1,309,159.	