

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

**2006**

Open to Public Inspection

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 2006 calendar year, or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

**B** Check if applicable:

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

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

**C** Name of organization  
**UNITED WAY OF FORSYTH COUNTY, INC.**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**P. O. BOX 1350**

City or town, state or country, and ZIP + 4  
**CUMMING, GA 30028**

**D** Employer identification number  
**58-1925396**

**E** Telephone number  
**770-781-4110**

**F** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

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

*H and 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? (If "No," attach a list.) **N/A**  Yes  No

**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.UNITEDWAYFORSYTH.COM**

**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.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **2,339,802.**

**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**

<b>1</b> Contributions, gifts, grants, and similar amounts received:				
<b>a</b> Contributions to donor advised funds		<b>1a</b>		
<b>b</b> Direct public support (not included on line 1a)		<b>1b</b>	<b>2,262,707.</b>	
<b>c</b> Indirect public support (not included on line 1a)		<b>1c</b>		
<b>d</b> Government contributions (grants) (not included on line 1a)		<b>1d</b>		
<b>e</b> Total (add lines 1a through 1d) (cash \$ <b>2,262,707.</b> noncash \$ _____)		<b>1e</b>		<b>2,262,707.</b>
<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)		<b>2</b>		
<b>3</b> Membership dues and assessments		<b>3</b>		
<b>4</b> Interest on savings and temporary cash investments		<b>4</b>		
<b>5</b> Dividends and interest from securities		<b>5</b>		
<b>6 a</b> Gross rents		<b>6a</b>		<b>29,266.</b>
<b>b</b> Less: rental expenses		<b>6b</b>		
<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a		<b>6c</b>		
<b>7</b> Other investment income (describe _____)		<b>7</b>		
<b>8 a</b> Gross amount from sales of assets other than inventory		(A) Securities		(B) Other
<b>b</b> Less: cost or other basis and sales expenses		<b>8a</b>		
<b>c</b> Gain or (loss) (attach schedule)		<b>8b</b>		
<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B)		<b>8c</b>		
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		<b>9a</b>		
<b>a</b> Gross revenue (not including \$ <b>0.</b> of contributions reported on line 1b)		<b>9a</b>	<b>47,829.</b>	
<b>b</b> Less: direct expenses other than fundraising expenses		<b>9b</b>	<b>21,002.</b>	
<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a		<b>9c</b>		<b>26,827.</b>
<b>10 a</b> Gross sales of inventory, less returns and allowances		<b>10a</b>		
<b>b</b> Less: cost of goods sold		<b>10b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a		<b>10c</b>		
<b>11</b> Other revenue (from Part VII, line 103)		<b>11</b>		
<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11		<b>12</b>		<b>2,318,800.</b>
<b>13</b> Program services (from line 44, column (B))		<b>13</b>		<b>1,049,293.</b>
<b>14</b> Management and general (from line 44, column (C))		<b>14</b>		<b>83,427.</b>
<b>15</b> Fundraising (from line 44, column (D))		<b>15</b>		<b>67,413.</b>
<b>16</b> Payments to affiliates (attach schedule)		<b>16</b>		<b>7,089.</b>
<b>17</b> Total expenses. Add lines 16 and 44, column (A)		<b>17</b>		<b>1,207,222.</b>
<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12		<b>18</b>		<b>1,111,578.</b>
<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))		<b>19</b>		<b>2,108,958.</b>
<b>20</b> Other changes in net assets or fund balances (attach explanation)		<b>20</b>		<b>0.</b>
<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20		<b>21</b>		<b>3,220,536.</b>

523001  
01-18-07

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2006)