

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493126010200

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 private foundations)

Do not enter social security numbers on this form as it may be made public

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

UNITED WAY OF KING COUNTY

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

720 SECOND AVENUE

City or town, state or province, country, and ZIP or foreign postal code

SEATTLE, WA 98104

F Name and address of principal officer

GORDON A MCHENRY JR

720 SECOND AVENUE

SEATTLE, WA 98104

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW UWKC ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1921

M State of legal domicile WA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

UNITED WAY OF KING COUNTY AND OUR DONORS ARE BUILDING A COMMUNITY WHERE PEOPLE HAVE HOMES, STUDENTS GRADUATE AND FAMILIES ARE FINACIALLY STABLE OUR MISSION IS TO BRING CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

3

38

4 Number of independent voting members of the governing body (Part VI, line 1b)

4

38

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

5

222

6 Total number of volunteers (estimate if necessary)

6

20,018

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a

0

7b Net unrelated business taxable income from Form 990-T, line 34

7b

0

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d )

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

70,136,178

192,073

734,891

-158,131

70,905,011

Current Year

61,463,331

190,587

1,268,511

54,600

62,977,029

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3 )

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

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

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

b Total fundraising expenses (Part IX, column (D), line 25) ▶6,278,647

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

50,538,261

0

10,719,855

0

5,607,518

66,865,634

4,039,377

44,369,937

0

11,093,872

0

5,551,536

61,015,345

1,961,684

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

64,148,602

15,189,740

48,958,862

End of Year

63,562,823

12,634,444

50,928,379

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

DARRELL POWELL CHIEF OPERATING OFFICER

Type or print name and title

2020-03-17

Date

Paid Preparer Use Only

Print/Type preparer's name

Firm's name ▶ CLARK NUBER PS

Firm's address ▶ 10900 NE 4TH STREET SUITE 1400

BELLEVUE, WA 98004

Preparer's signature

Date 2020-03-17

Check ☐ if self-employed

PTIN P00746598

Firm's EIN ▶ 91-1194016

Phone no (425) 454-4919

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 (2018)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

UNITED WAY OF KING COUNTY BRINGS CARING PEOPLE TOGETHER TO GIVE, VOLUNTEER AND TAKE ACTION TO HELP PEOPLE IN NEED AND SOLVE OUR COMMUNITY'S TOUGHEST CHALLENGES WE BRING TOGETHER PEOPLE AND ORGANIZATIONS WITH THE PASSION, EXPERTISE AND RESOURCES TO GET THINGS DONE WE TAKE ON CHALLENGES LIKE MEETING BASIC NEEDS, ENDING HOMELESSNESS, AND GIVING EVERY CHILD AN EQUAL CHANCE TO SUCCEED WE INVEST IN SOLUTIONS AND ACHIEVE RESULTS

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**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

<b>4a</b>	(Code )	(Expenses \$	9,096,083	including grants of \$	8,305,579 )	(Revenue \$ )
See Additional Data						

<b>4b</b>	(Code )	(Expenses \$	7,753,080	including grants of \$	7,007,793 )	(Revenue \$ )
See Additional Data						

<b>4c</b>	(Code )	(Expenses \$	7,389,695	including grants of \$	4,500,921 )	(Revenue \$ )
See Additional Data						

See Additional Data Table

<b>4d</b>	Other program services (Describe in Schedule O )					
	(Expenses \$	26,398,870	including grants of \$	24,555,644 )	(Revenue \$	190,587 )

<b>4e</b>	<b>Total program service expenses ▶</b>	50,637,728
-----------	---	------------

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>1</b> Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>2</b> Yes	
<b>3</b> 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	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> 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	<b>4</b> Yes	
<b>5</b> 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	<b>5</b>	No
<b>6</b> 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	<b>6</b>	No
<b>7</b> 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	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<b>8</b>	No
<b>9</b> 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	<b>9</b> Yes	
<b>10</b> 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	<b>10</b> Yes	
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>11a</b> Yes	
<b>b</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	<b>11b</b> Yes	
<b>c</b> 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	<b>11c</b>	No
<b>d</b> 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	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>11e</b> Yes	
<b>f</b> 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	<b>11f</b>	No
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<b>12a</b> Yes	
<b>b</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	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	No
<b>b</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	<b>14b</b>	No
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	<b>15</b>	No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<b>16</b>	No
<b>17</b> 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)	<b>17</b>	No
<b>18</b> 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	<b>18</b> Yes	
<b>19</b> 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	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b> Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>	No

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

	Yes	No
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b> Yes	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	<b>24a</b>	No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>	
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>	No
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>	No
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>	No
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>	No
<b>28</b> 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)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>	No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>	No
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>	No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>29</b> Yes	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>	No
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>	No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>	No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>	No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>	No
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>	No
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>	No
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>	No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b> Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	<b>1a</b> 112	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b> Yes	

<b>2a</b> 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 . . . . .		<b>2a</b>	222			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . .				<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . .				<b>3b</b>		
<b>4a</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)? . . . .				<b>4a</b>		No
<b>b</b> If "Yes," enter the name of the foreign country <span style="border-bottom: 1px solid black; display: inline-block; width: 200px;"></span> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . .				<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .				<b>5c</b>		
<b>6a</b> 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? . . . .				<b>6a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .				<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>						
<b>a</b> 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? . . . . .				<b>7a</b>	Yes	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .				<b>7b</b>	Yes	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .				<b>7c</b>		No
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .				<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				<b>7e</b>		No
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . .				<b>7f</b>		No
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .				<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .				<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .				<b>8</b>		
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . .				<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . .				<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter						
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .				<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter						
<b>a</b> Gross income from members or shareholders . . . . .				<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .				<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?				<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>						
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O				<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .				<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand . . . . .				<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .				<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . .				<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .				<b>15</b>		No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .				<b>16</b>		No

**Part VI**

**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?		No
<b>7a</b>	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?		No
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	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		No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		No
<b>b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	Yes	
<b>b</b>	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>b</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 with respect to such arrangements?		

**Section C. Disclosure**

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

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.  
☒ Own website ☒ Another's website ☒ 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, address, and telephone number of the person who possesses the organization's books and records.  
 ► JENNIFER JOHNSTON 720 SECOND AVENUE SEATTLE, WA 98104 (206) 461-3700

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

1

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

● List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• 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 and any related organizations

● List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• 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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

## Part VII

<b>b Sub-Total</b>			
<b>c Total from continuation sheets to Part VII, Section A</b>			
<b>d Total (add lines 1b and 1c)</b>	1,170,833	0	130,368

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000  
of reportable compensation from the organization ▶ 9

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual . . . . .</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual . . . . .</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person . . . . .</i>	5	No

## Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0



Part VIII		Statement of Revenue				
Check if Schedule O contains a response or note to any line in this Part VIII <input checked="" type="checkbox"/>						
		(A)	(B)	(C)	(D)	
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c	411,020			
	d Related organizations	1d				
	e Government grants (contributions)	1e	5,682,295			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	55,370,016			
	g Noncash contributions included in lines 1a - 1f \$ 6,106,951					
	h Total. Add lines 1a-1f . . . . .		61,463,331			
Program Service Revenue			Business Code			
	2a DESIGNATION PROCESSING		900099	150,252	150,252	
	b EDUCATION & OUTREACH		900099	29,635	29,635	
	c TRAINING		900099	10,700	10,700	
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f . . . . .		190,587			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . .		310,169			310,169
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties . . . . .					
			(i) Real	(ii) Personal		
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . .					
			(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory		30,699,534	661,564		
	b Less cost or other basis and sales expenses		30,395,229	7,527		
	c Gain or (loss)		304,305	654,037		
	d Net gain or (loss) . . . . .		958,342			958,342
	8a Gross income from fundraising events (not including \$ 411,020 of contributions reported on line 1c) See Part IV, line 18 . . . . .		a	150,600		
	b Less direct expenses . . . . .		b	103,297		
	c Net income or (loss) from fundraising events . . . . .			47,303		47,303
	9a Gross income from gaming activities See Part IV, line 19 . . . . .		a			
	b Less direct expenses . . . . .		b			
	c Net income or (loss) from gaming activities . . . . .					
	10a Gross sales of inventory, less returns and allowances . . . . .		a			
	b Less cost of goods sold . . . . .		b			
	c Net income or (loss) from sales of inventory . . . . .					
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d All other revenue . . . . .			7,297		7,297	
e Total. Add lines 11a-11d . . . . .			7,297			
12 Total revenue. See Instructions . . . . .			62,977,029	190,587	0	1,323,111

**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 or note to any line 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	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	44,369,937	44,369,937		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
<b>4</b> Benefits paid to or for members.				
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	555,473	101,236	378,593	75,644
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
<b>7</b> Other salaries and wages.	8,518,469	3,158,867	1,605,491	3,754,111
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	230,810	82,649	41,667	106,494
<b>9</b> Other employee benefits.	1,041,051	366,229	205,013	469,809
<b>10</b> Payroll taxes.	748,069	260,103	155,830	332,136
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.				
<b>b</b> Legal.				
<b>c</b> Accounting.	67,207	9,003	47,813	10,391
<b>d</b> Lobbying.	16,000	14,501	949	550
<b>e</b> Professional fundraising services. See Part IV, line 17.				
<b>f</b> Investment management fees.	28,874		28,874	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	508,017	189,833	219,894	98,290
<b>12</b> Advertising and promotion.	346,836	119,614	72,287	154,935
<b>13</b> Office expenses.	233,815	159,600	19,941	54,274
<b>14</b> Information technology.	558,757	263,059	83,659	212,039
<b>15</b> Royalties.				
<b>16</b> Occupancy.	250,262	59,762	135,317	55,183
<b>17</b> Travel.	262,115	189,223	26,463	46,429
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.				
<b>20</b> Interest.	536	149	80	307
<b>21</b> Payments to affiliates.	550,839	95,847	370,714	84,278
<b>22</b> Depreciation, depletion, and amortization.	1,660,870	595,242	516,655	548,973
<b>23</b> Insurance.	44,156	10,545	23,875	9,736
<b>24</b> 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):				
<b>a</b> SUPPLIES	452,189	335,193	43,531	73,465
<b>b</b> SPECIAL EVENTS	239,276	183,417	56,299	-440
<b>c</b> IN-KIND	49,652	0	0	49,652
<b>d</b> UBI TAXES	18,600	3,149	12,025	3,426
<b>e</b> All other expenses	263,535	70,570	54,000	138,965
<b>25</b> Total functional expenses. Add lines 1 through 24e.	61,015,345	50,637,728	4,098,970	6,278,647
<b>26</b> 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).				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		4,892,250	<b>1</b>	2,167,344
	<b>2</b>	Savings and temporary cash investments . . . . .		15,691	<b>2</b>	2,141,604
	<b>3</b>	Pledges and grants receivable, net . . . . .		36,152,997	<b>3</b>	33,278,743
	<b>4</b>	Accounts receivable, net . . . . .		28,828	<b>4</b>	109,009
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			<b>5</b>	
	<b>6</b>	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 . . . . .			<b>6</b>	
	<b>7</b>	Notes and loans receivable, net . . . . .			<b>7</b>	
	<b>8</b>	Inventories for sale or use . . . . .		52,585	<b>8</b>	24,535
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		319,603	<b>9</b>	200,276
	<b>10a</b>	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D.	<b>10a</b>	19,069,812		
	<b>b</b>	Less: accumulated depreciation	<b>10b</b>	10,321,225		
	<b>11</b>	Investments—publicly traded securities . . . . .		214,298	<b>11</b>	4,548,973
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		12,270,674	<b>12</b>	12,320,718
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .			<b>13</b>	
	<b>14</b>	Intangible assets . . . . .		2,890	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		0	<b>15</b>	23,034
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		64,148,602	<b>16</b>	63,562,823	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		6,080,591	<b>17</b>	4,354,385
	<b>18</b>	Grants payable . . . . .			<b>18</b>	
	<b>19</b>	Deferred revenue . . . . .			<b>19</b>	
	<b>20</b>	Tax-exempt bond liabilities . . . . .			<b>20</b>	
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		9,086,057	<b>21</b>	8,241,008
	<b>22</b>	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 . . . . .			<b>22</b>	
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .			<b>23</b>	
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .			<b>24</b>	
	<b>25</b>	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 D . . . . .		23,092	<b>25</b>	39,051
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		15,189,740	<b>26</b>	12,634,444
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets . . . . .		17,346,042	<b>27</b>	21,689,971
	<b>28</b>	Temporarily restricted net assets . . . . .		26,225,525	<b>28</b>	23,751,945
	<b>29</b>	Permanently restricted net assets . . . . .		5,387,295	<b>29</b>	5,486,463
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>32</b>	
<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		48,958,862	<b>33</b>	50,928,379	
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		64,148,602	<b>34</b>	63,562,823	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	62,977,029
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	61,015,345
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	1,961,684
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	48,958,862
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	7,833
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	50,928,379

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> 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		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b> 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?	Yes	
<b>b</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	Yes	

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 91-0565555  
**Name:** UNITED WAY OF KING COUNTY

Form 990 (2018)

**Form 990, Part III, Line 4a:**

EARLY LEARNING ACHIEVEMENTS - 1,319 FAMILIES PARTICIPATED IN THE PARENT-CHILD HOME PROGRAM, A TWO-YEAR HOME VISITING PROGRAM THAT HELPS LOW INCOME CHILDREN AGES 2-4 BE READY TO LEARN WHEN THEY ENTER KINDERGARTEN AND BECOME 30 PERCENTAGE POINTS MORE LIKELY TO GRADUATE HIGH SCHOOL  
2,183 PARENTS RECEIVED SERVICES TO BE BETTER ABLE TO SUPPORT THEIR CHILDREN'S EDUCATION

**Form 990, Part III, Line 4b:**

ENDING HOMELESSNESS - HOMELESSNESS IS A CRISIS IN OUR COMMUNITY, WITH MORE THAN 11,000 PEOPLE ON ANY GIVEN NIGHT LIVING ON THE STREETS, IN THEIR CARS OR IN EMERGENCY SHELTERS WITH OUR DONORS, UNITED WAY OF KING COUNTY FOCUSES ON INCOME AND HOUSING TO MAKE THE MOST IMPACT ON OUR COUNTY-WIDE CRISIS WE BELIEVE THAT EVERY PERSON DESERVES A SAFE PLACE TO CALL HOME OUR ACHIEVEMENTS - 1,573 PEOPLE EXPERIENCING HOMELESSNESS WERE EMPLOYED THROUGH OUR JOBS CONNECT PROGRAM 2,272 PEOPLE MOVED OUT OF HOMELESSNESS INTO HOUSING THROUGH THE STREETS TO HOME PROGRAM MORE THAN 2,760 INDIVIDUALS AND FAMILIES EXPERIENCING HOMELESSNESS WERE CONNECTED TO VITAL SERVICES AND RESOURCES AT THE COMMUNITY RESOURCE EXCHANGE AND FAMILY RESOURCE EXCHANGE EVENTS IN FY19, UNITED WAY OF KING COUNTY ALSO LAUNCHED THE EVICTION PREVENTION PROGRAM HOME BASE PROVIDING LEGAL ASSISTANCE FOR 1,296 FAMILIES AND PREVENTING 414 EVICTIONS IN THE FIRST SIX MONTHS OF OPERATION

---

**Form 990, Part III, Line 4c:**

FINANCIAL STABILITY - 21,975 FREE TAX RETURNS FILED FOR LOW-INCOME EARNERS, BRINGING \$31.6 MILLION IN FEDERAL REFUNDS BACK INTO OUR COMMUNITY  
560,000 FREE SUMMER MEALS AND 148,684 BREAKFASTS SERVED TO LOW-INCOME YOUTH AND STUDENTS

---

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 20,186,005 including grants of \$ 20,186,005 ) (Revenue \$ 150,252 )

DONOR DESIGNATIONS - CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY

(Code ) (Expenses \$ 6,212,865 including grants of \$ 4,369,639 ) (Revenue \$ 40,335 )

OTHER PROGRAMS INCLUDE SUPPORTING YOUTH ACHIEVEMENTS - 3,537 YOUTH WHO HAVE DROPPED OUT OF SCHOOL AND ARE NOT WORKING ENROLLED IN OUR RECONNECTING YOUTH PROGRAM TO CONTINUE THEIR PROGRESS TOWARDS A GED OR HIGH-SCHOOL DIPLOMA 898 YOUTH WHO WERE DISCONNECTED FROM THEIR EDUCATION ACHIEVED HIGH-SCHOOL DIPLOMA OR EQUIVALENCY AND ARE ON TRACK TO POST-SECONDARY CREDENTIALS OUR VOLUNTEER CENTER RECRUITS AND TRAINS VOLUNTEERS FOR MANY NON PROFITS AND DESIGNATIONS DONATED TO UWKC ARE GIVEN TO OTHER NON PROFIT ORGANIZATIONS TO STRENGTHEN OUR COMMUNITY



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRED RIVERA ..... CHAIR	1 00 .....	X		X				0	0	0
CAROL NELSON ..... BOARD CHAIR ELCT, VICE CHAIR & SCTRY	1 00 .....	X		X				0	0	0
BRENT BEARDALL ..... TREASURER	1 00 .....	X		X				0	0	0
AMBIKA SINGH ..... DIRECTOR	1 00 .....	X						0	0	0
ANGELA STOWELL ..... DIRECTOR	1 00 .....	X						0	0	0
BLAIR TAYLOR ..... DIRECTOR	1 00 .....	X						0	0	0
BRADY WALKINSHAW ..... DIRECTOR	1 00 .....	X						0	0	0
BREE KAMEENUI-RAMIREZ ..... DIRECTOR	1 00 .....	X						0	0	0
BRIAN MCANDREWS ..... DIRECTOR	1 00 .....	X						0	0	0
CALVIN WATTS ..... DIRECTOR	1 00 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CARMEN BEST ..... DIRECTOR	1 00 .....	X						0	0	0
CHRIS CAPOSSELA ..... DIRECTOR	1 00 .....	X						0	0	0
CRAIG GRYNIEWICZ ..... DIRECTOR	1 00 .....	X						0	0	0
DAVE BURMAN ..... DIRECTOR	1 00 .....	X						0	0	0
DOUG ORWILER ..... DIRECTOR	1 00 .....	X						0	0	0
JASON COREN ..... DIRECTOR	1 00 .....	X						0	0	0
JEFF BRADLEY ..... DIRECTOR	1 00 .....	X						0	0	0
JONATHAN BURKS ..... DIRECTOR	1 00 .....	X						0	0	0
JONATHAN SPOSATO ..... DIRECTOR	1 00 .....	X						0	0	0
KAREN MARCOTTE SOLIMANO ..... DIRECTOR	1 00 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KATE BEHNCKEN ..... DIRECTOR	1 00 .....	X						0	0	0
KATHY SURACE SMITH ..... DIRECTOR	1 00 .....	X						0	0	0
LEIGH TONER ..... DIRECTOR	1 00 .....	X						0	0	0
LUIS MASIERI ..... DIRECTOR	1 00 .....	X						0	0	0
MALA RAMAN ..... DIRECTOR	1 00 .....	X						0	0	0
MARGARET MEISTER ..... DIRECTOR	1 00 .....	X						0	0	0
MIKA YAMAMOTO ..... DIRECTOR	1 00 .....	X						0	0	0
NATHAN JAMES ..... DIRECTOR	1 00 .....	X						0	0	0
NICOLE GRANT ..... DIRECTOR	1 00 .....	X						0	0	0
NOREEN SHAHANI ..... DIRECTOR	1 00 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PETER ORSER ..... DIRECTOR	1 00 .....	X						0	0	0
RICHARD ROMERO ..... DIRECTOR	1 00 .....	X						0	0	0
SANDRA MADRID ..... DIRECTOR	1 00 .....	X						0	0	0
SANGITA WOERNER ..... DIRECTOR	1 00 .....	X						0	0	0
SCOTT MEDEN ..... DIRECTOR	1 00 .....	X						0	0	0
SHOUAN PAN ..... DIRECTOR	1 00 .....	X						0	0	0
STEPHAN BLANFORD ..... DIRECTOR	1 00 .....	X						0	0	0
SUE SHERBROOKE ..... DIRECTOR	1 00 .....	X						0	0	0
JONATHAN FINE ..... PRESIDENT & CEO	40 00 .....			X				320,646	0	32,710
DARRELL POWELL ..... COO	40 00 .....			X				167,124	0	8,630

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JIM YEARBY ..... VP HUMAN RESOURCES	40 00 .....					X		140,408	0	24,977
ERICA WILEY ..... VP DEVELOPMENT	40 00 .....					X		138,887	0	16,855
SARA LEVIN ..... VP COMMUNITY SERVICES	40 00 .....					X		143,316	0	17,298
CHRIS HYNES ..... VP BRAND MANAGEMENT	40 00 .....					X		149,755	0	10,885
THERESA FUJIWARA ..... ASSOC VP COMM SVCS	40 00 .....					X		110,697	0	19,013

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
UNITED WAY OF KING COUNTY

Employer identification number  
91-0565555

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 12, 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 (Form 990 or 990-EZ) )
- 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
- 5

☐

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 )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- 10

☐

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 )
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	117,600,438	77,119,973	59,989,263	70,136,178	61,463,331	386,309,183
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	<b>Total.</b> Add lines 1 through 3	117,600,438	77,119,973	59,989,263	70,136,178	61,463,331	386,309,183
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)						71,416,435
6	<b>Public support.</b> Subtract line 5 from line 4						314,892,748

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	117,600,438	77,119,973	59,989,263	70,136,178	61,463,331	386,309,183
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	672,523	513,100	538,412	719,424	310,169	2,753,628
9	Net income from unrelated business activities, whether or not the business is regularly carried on		191,293	400,314		47,303	638,910
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				52,954	7,297	60,251
11	<b>Total support.</b> Add lines 7 through 10						389,761,972
12	Gross receipts from related activities, etc. (see instructions)					12	1,181,796
13	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
<b>14</b>	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b> 80.790 %
<b>15</b>	Public support percentage for 2017 Schedule A, Part II, line 14	<b>15</b> 85.240 %
<b>16a</b>	<b>33 1/3% support test—2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>	
<b>b</b>	<b>33 1/3% support test—2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>17a</b>	<b>10%-facts-and-circumstances test—2018.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>b</b>	<b>10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>18</b>	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (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 section 501(c)(3) organization, check this box and **stop here** ► ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2018.** 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 ► ☐

**b 33 1/3% support tests—2017.** 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 ► ☐

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



Part IV

Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer (a) and (b) below.	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities		
2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard		
3b		

<b>Part V</b> <b>Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations</b>			
<div>1</div> <div><input type="checkbox"/> Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) <b>See instructions.</b> All other Type III non-functionally integrated supporting organizations must complete Sections A through E</div>			
<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013. . . . .			
b From 2014. . . . .			
c From 2015. . . . .			
d From 2016. . . . .			
e From 2017. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014. . . . .			
b Excess from 2015. . . . .			
c Excess from 2016. . . . .			
d Excess from 2017. . . . .			
e Excess from 2018. . . . .			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

**990 Schedule A, Supplemental Information**

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2017 AMOUNT \$ 52,954 2018 AMOUNT \$ 7,297

<b>SCHEDULE C</b> <b>(Form 990 or 990-EZ)</b>  Department of the Treasury Internal Revenue Service	<b>Political Campaign and Lobbying Activities</b>  For Organizations Exempt From Income Tax Under section 501(c) and section 527  ▶ <b>Complete if the organization is described below.</b> ▶ <b>Attach to Form 990 or Form 990-EZ.</b> ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.	OMB No 1545-0047  <b>2018</b>  <b>Open to Public Inspection</b>

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization UNITED WAY OF KING COUNTY	<b>Employer identification number</b> 91-0565555
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2** Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3** Volunteer hours for political campaign activities (see instructions) ▶ \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**
- 4a** Was a correction made? ☐ **Yes** ☐ **No**
- b** If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3** Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4** Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	54,356													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)	54,356													
<b>d</b> Other exempt purpose expenditures	61,225,937													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	61,280,293													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	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		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
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													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-	0													
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-	0													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**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 separate instructions for lines 2a through 2f.)**

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
<b>c</b> Total lobbying expenditures	48,137	45,850	41,621	54,356	189,964
<b>d</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities?			
<b>j</b>	Total. Add lines 1c through 1i			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year	<b>2a</b>	
<b>b</b>	Carryover from last year	<b>2b</b>	
<b>c</b>	Total	<b>2c</b>	
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
------------------	-------------



SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
UNITED WAY OF KING COUNTY

Employer identification number  
91-0565555

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

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 impermissible private benefit?

☐ Yes ☐ No

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

1 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

2 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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a 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, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(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

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

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

3

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

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

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?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ 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" on Form 990, Part IV, line 10.

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	12,270,674	11,564,226	10,746,443	11,724,946	11,681,917
b					260,000
c	543,742	1,307,784	1,377,291	-135,266	-156,302
d					
e	464,824	531,998	492,847	783,857	
f	28,874	69,338	66,661	59,380	60,669
g	12,320,718	12,270,674	11,564,226	10,746,443	11,724,946

2

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

a

Board designated or quasi-endowment

55 400 %

b

Permanent endowment

44 600 %

c

Temporarily restricted endowment

0 %

The percentages on 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

(ii)

related organizations

b

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

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. 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	(d) Book value
1a Land		2,352,000		2,352,000
b Buildings		7,498,550	2,983,110	4,515,440
c Leasehold improvements				
d Equipment		9,219,262	7,338,115	1,881,147
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				8,748,587

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.  
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) BENEFICIAL INTEREST IN TRUSTS	12,320,718	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	12,320,718	

Part VIII

Investments—Program Related.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 ) . . . . . ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
CAPITAL LEASE PAYABLE	39,051	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	39,051	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	43,444,409
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	7,833
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	478,602
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	-20,129,879
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-19,643,444
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	63,087,853
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	-110,824
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-110,824
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	62,977,029

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	41,474,892
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	478,602
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	110,824
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	589,426
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	40,885,466
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	20,129,879
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	20,129,879
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	61,015,345

**Part XIII Supplemental Information**

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.

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 91-0565555  
**Name:** UNITED WAY OF KING COUNTY

**Supplemental Information**

Return Reference	Explanation
PART IV, LINE 2B	DONOR DESIGNATIONS AND CONTRIBUTIONS THAT ARE DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN TO UNITED WAY OF KING COUNTY

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	ENDOWMENT DISTRIBUTIONS ARE USED FOR ADMINISTRATIVE EXPENSES AND PROGRAM SERVICES AS DICTATED BY THE ENDOWMENT AGREEMENTS

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	PASS THROUGH DONOR DESIGNATIONS -20,101,005 INVESTMENT EXPENSE -28,874



Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES -103,297    LOSS ON DISPOSAL OF FIXED ASSETS -7,527

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES 103,297    LOSS ON DISPOSAL OF FIXED ASSETS 7,527

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	PASS THROUGH DONOR DESIGNATIONS 20,101,005 INVESTMENT EXPENSES 28,874



**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		<b>DAY/NIGHT OUT FOR CARING</b> (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	561,620			561,620
	<b>2</b> Less Contributions . . . . .	411,020			411,020
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	150,600			150,600
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .	10,000			10,000
	<b>7</b> Food and beverages . . . . .	18,226			18,226
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .	75,071			75,071
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				103,297
	<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				47,303

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶					

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

**b** If "No," explain \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

**b** If "Yes," explain \_\_\_\_\_

<b>11</b> Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>						
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>						
<b>13</b> Indicate the percentage of gaming activity conducted in							
<b>a</b> The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"><b>13a</b></td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: center;">%</td> </tr> <tr> <td style="text-align: center;"><b>13b</b></td> <td></td> <td style="text-align: center;">%</td> </tr> </table>	<b>13a</b>		%	<b>13b</b>		%
<b>13a</b>		%					
<b>13b</b>		%					
<b>b</b> An outside facility							

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► .....

Address ► .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes**   ☐ **No**

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ ..... and the amount of gaming revenue retained by the third party ► \$ .....

**c** If "Yes," enter name and address of the third party

Name ► .....

Address ► .....

**16** Gaming manager information

Name ► .....

Gaming manager compensation ► \$ .....

Description of services provided ► .....

☐ Director/officer      ☐ Employee      ☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes**   ☐ **No**

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ .....

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference

Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I  
(Form 990)

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
UNITED WAY OF KING COUNTY

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public  
Inspection

Employer identification number  
91-0565555

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? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 364

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

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	UNITED WAY OF KING COUNTY (UWKC) RESPECTS THE DESIRE OF DONORS TO CHOOSE TO DESIGNATE THEIR CONTRIBUTIONS SEVERAL OPTIONS ARE AVAILABLE TO ACCOMMODATE DONORS' CHOICES A DONOR MAY DESIGNATE HIS/HER CONTRIBUTION TO A UNITED WAY PARTNER AGENCY THIS CONTRIBUTION WILL BE TO THE AGENCY IN ADDITION TO ALLOCATIONS FROM UWKC THOSE UWKC DOLLARS GRANTED DIRECTLY TO UWKC AGENCIES ARE MONITORED THROUGH ROUTINE REPORTING OF GRANTEEES, AUDIT INFORMATION AND REVIEW AND PERIODIC SITE VISITS A DONOR MAY DESIGNATE HIS/HER CONTRIBUTION TO ANY UNITED WAY IN THE UNITED STATES A DONOR MAY ALSO DESIGNATE HIS/HER CONTRIBUTION TO ANY CERTIFIED 501(C)(3) ORGANIZATION IN THE USA FOR MOST AGENCIES, WE VERIFY THEIR 501(C)(3) STATUS USING DATA FILES THAT WE RECEIVE FROM THE IRS THE IRS UPDATES THESE FILES ABOUT ONCE A MONTH AND MAKES THEM AVAILABLE FOR RETRIEVAL FROM THEIR WEBSITE WE INCORPORATE THIS DATA INTO A SEARCHABLE DATABASE FOR ORGANIZATIONS NOT FOUND IN THE IRS DATA FILES, WE REQUIRE A COPY OF THE 501(C)(3) DETERMINATION LETTER ISSUED TO THE ORGANIZATION BY THE IRS, OR IN A FEW INSTANCES, WE VERIFY THE 501(C)(3) ELIGIBILITY WITH AN IRS AGENT OVER THE PHONE SEVERAL TIMES A YEAR, WE REVIEW THE 501(C)(3) ORGANIZATIONS WE HAVE SET UP IN OUR DATABASE AGAINST NEW DATA WE RECEIVE FROM THE IRS TO ENSURE THAT WE ONLY PAY OUT TO THOSE AGENCIES THAT ARE CURRENTLY ELIGIBLE UWKC RESERVES THE RIGHT TO COLLECT A FEE FOR PROCESSING DONOR-DESIGNATED DOLLARS UWKC ALSO MAY DECLINE TO ACCEPT CERTAIN DONOR-DESIGNATED DOLLARS UWKC MAY ENCOUNTER CIRCUMSTANCES WHERE IT MUST HOLD OR FREEZE DONOR-DESIGNATED DOLLARS DUE TO LEGAL COMPULSION, THREAT OF COMPULSION, OR OTHER REASONS
SCHEDULE I, PART II	THE INFORMATION INCLUDED IN PART II IS BASED ON THE ACCRUAL METHOD OF ACCOUNTING



Additional Data

Software ID:  
Software Version:  
EIN: 91-0565555  
Name: UNITED WAY OF KING COUNTY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2018 SPECIAL OLYMPICS USA GAMES 2101 4TH AVE STE 910 SEATTLE, WA 98121	81-0762136	501(C)3	75,000				DESIGNATED GIFT
4C COALITION (CLERGY COMMUNITY FOR CHILDREN AND YOUTH) 1404 EAST YESLER WAY SUITE 202 A SEATTLE, WA 98122	91-2064753	501(C)3	82,100				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
501 COMMONS PACIFIC TOWER SUITE 1101 1200 12TH SEATTLE, WA 98144	94-3089631	501(C)3	39,780				PROG INVST & DESG GIFTS
A CONTEMPORARY THEATRE INC 700 UNION ST SEATTLE, WA 98101	91-0787792	501(C)3	13,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABIDE WORLDWIDE PO BOX 464 OTIS ORCHARDS, WA 99027	82-2961410	501(C)3	21,060				DESIGNATED GIFT
ABUNDANT LIFE CHRISTIAN CHURCH 17241 SE HEMRICH RD DAMASCUS, OR 97089	93-1023892	501(C)3	15,024				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVENT ANGLICAN PO BOX 3372 KIRKLAND, WA 98083	46-1499924	501(C)3	9,000				DESIGNATED GIFT
AGE UP 3810 BEACON AVE S SEATTLE, WA 98108	45-5092355	501(C)3	61,400				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR EDUCATION 509 OLIVE WAY STE 500 SEATTLE, WA 98101	91-1508191	501(C)3	28,472				DESIGNATED GIFT
AMARA 5907 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98118	91-0577487	501(C)3	34,767				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	13-1788491	501(C)3	5,845				DESIGNATED GIFT
AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC 125 BROAD STREET NEW YORK, NY 10004	13-6213516	501(C)3	5,841				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION OF WASHINGTON FOUNDATION 901 FIFTH AVENUE SEATTLE, WA 98164	23-7076867	501(C)3	12,552				DESIGNATED GIFT
AMERICAN LIBRARY ASSOCIATION 50 E HURON ST CHICAGO, IL 60611	36-2166947	501(C)3	388,372				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS PO BOX 73857 CHICAGO, IL 60673	53-0196605	501(C)3	34,102				DESIGNATED GIFT
ANDEAN HEALTH AND DEVELOPMENT INC 1100 DELAPLAINE CT MADISON, WI 53715	39-1809174	501(C)3	25,000				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON EDUCATION FOUNDATION INC 122 E COLLEGE AVE STE 1-B APPLETON, WI 54911	39-1866090	501(C)3	50,000				DESIGNATED GIFT
ARBORETUM FOUNDATION 2300 ARBORETUM DR E SEATTLE, WA 98112	91-0613583	501(C)3	9,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESAN HOUSING AUTHORITY (AHA) 100 23RD AVE S SEATTLE, WA 98144	91-1099134	501(C)3	35,000				PROG INVST & DESG GIFTS
ARCHDIOCESE OF SEATTLE 710 9TH AVE SEATTLE, WA 98104	91-0778147	501(C)3	22,430				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTHRITIS FOUNDATION INC 115 NE 100TH ST STE 350 SEATTLE, WA 98125	38-3826066	501(C)3	5,099				DESIGNATED GIFT
ARTSFUND PO BOX 19780 SEATTLE, WA 98109	91-0839644	501(C)3	6,700				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN & PACIFIC ISLANDER WOMEN & FAMILY SAFETY CENTER PO BOX 14047 SEATTLE, WA 98114	91-1674016	501(C)3	30,000				PROGRAM INVESTMENT
ASIAN COUNSELING AND REFERRAL SERVICE 3639 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98144	91-0916176	501(C)3	287,679				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATLANTIC STREET CENTER 2103 S ATLANTIC ST SEATTLE, WA 98144	91-0568710	501(C)3	775,557				PROG INVST & DESG GIFTS
AUBURN FOOD BANK PO BOX 464 AUBURN, WA 98071	91-1215485	501(C)3	36,480				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUBURN SCHOOL DISTRICT NO408 915 4TH ST NE AUBURN, WA 980024492	91-6001640	GOVERNMENT	63,687				PROGRAM INVESTMENT
AUBURN YOUTH RESOURCES 1000 AUBURN WAY S AUBURN, WA 98002	91-0903084	501(C)3	110,000				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B NAI BRITH MENS CAMP ASSOCIATION 9400 SW BEAVERTON HILLSDALE NO 131A BEAVERTON, OR 97005	91-1842787	501(C)3	10,000				DESIGNATED GIFT
BALLARD FOOD BANK 5130 LEARY AVE NW SEATTLE, WA 98107	91-1428805	501(C)3	20,499				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BANCHERO DISABILITY PARTNERS 13732 MIDVALE AVE N APT 103 SEATTLE, WA 98133	91-0879990	501(C)3	10,000				DESIGNATED GIFT
BELLEVUE BOYS AND GIRLS CLUB 209 100TH AVE NE BELLEVUE, WA 98004	91-0776451	501(C)3	26,280				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLEVUE COLLEGE FOUNDATION 3000 LANDERHOLM CIRCLE SE NO A101 BELLEVUE, WA 98007	91-1051671	501(C)3	156,280				PROG INVST & DESG GIFTS
BELLEVUE SCHOOLS FOUNDATION PO BOX 40644 BELLEVUE, WA 98015	91-1080997	501(C)3	5,175				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHANY BAPTIST CHURCH 713 S HILL PARK DR PUYALLUP, WA 98373	91-0963264	501(C)3	9,600				DESIGNATED GIFT
BIG BROTHERS BIG SISTERS OF KING CNTY 1600 S GRAHAM ST SEATTLE, WA 98108	91-0673185	501(C)3	51,750				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRTH TO THREE DEVELOPMENTAL CENTER PO BOX 24269 FEDERAL WAY, WA 98093	91-0889019	501(C)3	25,967				PROGRAM INVESTMENT
BISHOP BLANCHET HIGH SCHOOL 8200 WALLINGFORD AVE N SEATTLE, WA 98103	91-0617728	501(C)3	5,050				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK DIAMOND COMMUNITY CENTER PO BOX 480 BLACK DIAMOND, WA 98010	91-1111686	501(C)3	17,612				PROG INVST & DESG GIFTS
BOY SCOUTS OF AMERICA 3120 RAINIER AVE S SEATTLE, WA 98144	91-0569878	501(C)3	25,295				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYER CHILDREN'S CLINIC 1850 BOYER AVE E SEATTLE, WA 98112	91-1316838	501(C)3	20,039				PROG INVST & DESG GIFTS
BOYS & GIRLS CLUBS OF KING COUNTY 603 STEWART ST 300 SEATTLE, WA 98101	91-0532600	501(C)3	62,542				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREAST CANCER RESEARCH FOUNDATION INC 28 WEST 44TH STREET SUITE 609 NEW YORK, NY 10036	13-3727250	501(C)3	15,260				DESIGNATED GIFT
BYRD BARR PLACE 722 18TH AVE SEATTLE, WA 98122	91-0786727	501(C)3	81,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
C C H S NETWORK INC 71 MAPLE ST ONEONTA, NY 13820	22-3634814	501(C)3	5,980				DESIGNATED GIFT
CALL OF COMPASSION NW 3612 NW 44TH ST SEATTLE, WA 98105	81-1047399	501(C)3	15,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP SOLOMON SCHECHTER INC 117 E LOUISA ST BOX 110 SEATTLE, WA 98102	93-0572590	501(C)3	10,000				DESIGNATED GIFT
CARES OF WASHINGTON 1833 N 105TH ST STE 201 SEATTLE, WA 98133	13-4237286	501(C)3	120,050				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA LATINA 317 17TH AVE S SEATTLE, WA 98144	91-1689251	501(C)3	126,504				PROG INVST & DESG GIFTS
CASCADE PUBLIC MEDIA 401 MERCER ST SEATTLE, WA 98109	91-1221895	501(C)3	5,475				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASCADIA COLLEGE FOUNDATION 18345 CAMPUS WAY NE BOTHELL, WA 98011	91-1986593	501(C)3	15,000				PROGRAM INVESTMENT
CATHOLIC COMMUNITY SERVICES 100 - 23RD AVE SOUTH SEATTLE, WA 981442302	91-1585652	501(C)3	8,973				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON 100 23RD AVE S SEATTLE, WA 98144	91-1585652	501(C)3	484,155				PROG INVST & DESG GIFTS
CENTER FOR HUMAN SERVICES 17018 - 15TH AVE NE SHORELINE, WA 98155	23-7082323	501(C)3	55,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR MULTI-CULTURAL HEALTH 105 14TH AVENUE SEATTLE, WA 98122	91-0983698	501(C)3	47,500				PROGRAM INVESTMENT
CHARTER OAK EVANGELICAL FREE CHURCH 12212 NE 299TH ST BATTLE GROUND, WA 98604	91-1049205	501(C)3	31,800				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHIEF SEATTLE CLUB 410 2ND AVENUE EXT S SEATTLE, WA 98104	91-0852503	501(C)3	201,168				PROG INVST & DESG GIFTS
CHILD CARE RESOURCES 1225 S WELLER ST STE 300 SEATTLE, WA 98144	91-1465046	501(C)3	342,990				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDHAVEN 316 BROADWAY STE 305 SEATTLE, WA 98122	91-0402430	501(C)3	189,862				PROG INVST & DESG GIFTS
CHILDREN AND YOUTH JUSTICE CENTER 615 2ND AVE STE 275 SEATTLE, WA 98104	20-4457248	501(C)3	256,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOME SOCIETY OF WASHINGTON PO BOX 15190 SEATTLE, WA 98115	91-0575955	501(C)3	927,009				PROG INVST & DESG GIFTS
CHILDREN'S THERAPY CENTER 10811 SE KENT KANGLEY RD KENT, WA 98030	20-5356206	501(C)3	38,485				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHINESE INFORMATION AND SERVICE CENTER 611 S LANE ST SEATTLE, WA 98104	23-7438529	501(C)3	394,348				PROG INVST & DESG GIFTS
CHURCH OF JESUS CHRIST OF LATTER DAY SAINTS 50 EAST NORTH TEMPLE ST SALT LAKE CITY, UT 84150	23-7300405	501(C)3	11,240				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLASSICAL 98 1 10 HARRISON ST SEATTLE, WA 98109	27-3067797	501(C)3	102,168				DESIGNATED GIFT
COALITION FOR REFUGEES FROM BURMA 1265 S MAIN ST SUITE 309 SEATTLE, WA 98144	27-1458930	501(C)3	103,083				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE SUCCESS FOUNDATION 15500 SE 30TH PL STE 200 BELLEVUE, WA 98007	91-2036088	501(C)3	7,750				DESIGNATED GIFT
COLORADO SEMINARY 2199 S UNIVERSITY BLVD DENVER, CO 80210	84-0404231	501(C)3	25,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS - SEATTLE PO BOX 24872 SEATTLE, WA 98124	91-1910330	501(C)3	25,100				PROG INVST & DESG GIFTS
COMMUNITIES IN SCHOOLS OF KENT PO BOX 62 KENT, WA 98035	91-1523924	501(C)3	20,450				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF RENTON 1055 S GRADY WAY RENTON, WA 98057	91-1689158	501(C)3	5,735				DESIGNATED GIFT
COMMUNITY ACTION OF VENTURA COUNTY 621 RICHMOND AVE OXNARD, CA 93030	95-2408644	501(C)3	7,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMPASS HOUSING ALLIANCE 77 S WASHINGTON ST 5TH FL SEATTLE, WA 98104	91-0578229	501(C)3	172,675				PROG INVST & DESG GIFTS
CONGREGATIONAL CHURCH OF MERCER ISLAND 4545 ISLAND CREST WAY MERCER ISLAND, WA 98040	91-6175428	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATIONS FOR THE HOMELESS 2650 148TH AVE SE 202 BELLEVUE, WA 98007	45-3932748	501(C)3	169,551				PROG INVST & DESG GIFTS
CONGRESSIONAL HUNGER CENTER 810 7TH STREET NE SUITE 02-14 WASHINGTON, DC 20002	52-1842738	501(C)3	6,750				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSEJO COUNSELING AND REFERRAL SERVICES 3808 S ANGELINE ST SEATTLE, WA 98118	91-1021247	501(C)3	30,000				PROGRAM INVESTMENT
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE INC 151 ELLIS ST NE ATLANTA, GA 30303	13-1685039	501(C)3	55,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONE COMMUNITY CHURCH PORTLAND INC PO BOX 23396 TIGARD, OR 97281	42-1755583	501(C)3	13,500				DESIGNATED GIFT
CORPORATION FOR NATIONAL & COMMUNITY SERVICE 1201 NEW YORK AVENUE NW 8TH FLOOR WASHINGTON, DC 20525	52-0971471	501(C)3	162,454				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORPORATION OF GONZAGA UNIVERSITY 502 E BOONE AVE SPOKANE, WA 99258	91-0236600	501(C)3	23,562				DESIGNATED GIFT
COVENANT HOUSE 5 PENN PLAZA NEW YORK, NY 10001	13-2725416	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COYOTE CENTRAL 2300 E CHERRY ST SEATTLE, WA 98122	91-1444797	501(C)3	15,800				PROG INVST & DESG GIFTS
CREDIT UNIONS IN THE STATE OF WASHINGTON 1930 6TH AVE S SUITE 104 SEATTLE, WA 98134	91-0573334	501(C)3	7,840				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRISIS CONNECTION 9725 3RD AVENUE NE SUITE 300 SEATTLE, WA 98115	91-0773187	501(C)3	16,000				PROGRAM INVESTMENT
CRISIS CONNECTIONS 9725 3RD AVE NE SUITE 300 SEATTLE, WA 98115	91-0773187	501(C)3	325,854				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSS SOUND PRESBYTERIAN CHURCH PO BOX 11748 BAINBRIDGE IS, WA 98110	91-1715921	501(C)3	6,300				DESIGNATED GIFT
DENISE LOUIE EDUCATION CENTER 801 S LANE SEATTLE, WA 98104	91-1016974	501(C)3	195,859				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DES MOINES AREA FOOD BANK PO BOX 98788 DES MOINES, WA 98198	91-1183154	501(C)3	46,225				PROG INVST & DESG GIFTS
DOMESTIC ABUSE WOMENS NETWORK PO BOX 1449 KENT, WA 98035	91-1176122	501(C)3	23,591				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DONORSCHOOSE ORG 134 W 37TH ST NEW YORK, NY 10018	13-4129457	501(C)3	50,000				DESIGNATED GIFT
DOWNTOWN EMERGENCY SERVICE CENTER 515 3RD AVE SEATTLE, WA 98104	91-1275815	501(C)3	155,625				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST AFRICAN COMMUNITY SERVICES 7050 32ND AVENUE SOUTH SEATTLE, WA 98118	91-2138852	501(C)3	40,000				PROGRAM INVESTMENT
EAST KING OPTIONS PO BOX 45310 SEATTLE, WA 98145	91-2139335	501(C)3	12,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTSIDE BABY CORNER PO BOX 712 ISSAQUAH, WA 98027	91-1617032	501(C)3	7,051				DESIGNATED GIFT
EASTSIDE CHRISTIAN FELLOWSHIP 127 10TH ST S STE 600 KIRKLAND, WA 98033	91-2154608	501(C)3	19,026				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTSIDE LEGAL ASSISTANCE PROGRAM 1239 120TH AVE NE STE J BELLEVUE, WA 98005	91-1471384	501(C)3	10,000				DESIGNATED GIFT
EDUCATION WITH PURPOSE FOUNDATION FOR PACIFIC ISLANDERS 1615 W SMITH ST APT A-204 KENT, WA 98032	27-5022461	501(C)3	49,260				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144	91-0899927	501(C)3	502,981				PROG INVST & DESG GIFTS
EMPLOYMENT SECURITY DEPT PO BOX 9046 OLYMPIA, WA 985079046	91-6001099	GOVERNMENT	110,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMPOWERING YOUTH AND FAMOUTREACH 8172 RAINIER AVE SOUTH SEATTLE, WA 98118	02-0553368	501(C)3	25,000				PROGRAM INVESTMENT
ENCOMPASS 1407 BOALCH AVE NW NORTH BEND, WA 98045	91-0825232	501(C)3	206,643				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EQUAL JUSTICE WORKS 1730 M ST NW STE 800 WASHINGTON, DC 20036	52-1469738	501(C)3	10,000				DESIGNATED GIFT
EQUITY IN EDUCATION COALITION 605 SW 108TH STREET SEATTLE, WA 98146	81-4447635	501(C)3	19,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETHIOPIAN COMMUNITY MUTUAL ASSN 8323 RAINIER AVE S SEATTLE, WA 98118	91-1288919	501(C)3	25,600				PROG INVST & DESG GIFTS
EVERGREEN TREATMENT SERVICES 1700 AIRPORT WAY S SEATTLE, WA 98134	91-0903529	501(C)3	75,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITH BAPTIST CHURCH 25636 140TH AVE SE KENT, WA 98042	91-1150901	501(C)3	11,394				DESIGNATED GIFT
FAITH COVENANT CHURCH 1915 WASHINGTON ST SUMNER, WA 98390	91-6035117	501(C)3	12,350				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FALIS COMMUNITY SERVICE 10615 SE 256TH ST SUITE 104 KENT, WA 98030	82-2923129	501(C)3	31,050				PROGRAM INVESTMENT
FAMILYWORKS 1501 N 45TH ST SEATTLE, WA 98103	91-1757277	501(C)3	19,740				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FARESTART 700 VIRGINIA ST STE 300 SEATTLE, WA 98101	91-1546757	501(C)3	147,418				PROG INVST & DESG GIFTS
FEDERAL WAY CHAMBER OF COMMERCE ED FDN 1825 S 316 ST SUITE 101 FEDERAL WAY, WA 98063	94-3181464	501(C)3	17,500				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEDERAL WAY PUBLIC SCHOOLS 33330 8TH AVE S FEDERAL WAY, WA 98003	91-6001624	GOVERNMENT	70,000				PROGRAM INVESTMENT
FEDERAL WAY YOUTH ACTION TEAM 1911 SW CAMPUS DRIVE 653 FEDERAL WAY, WA 98023	82-4707184	501(C)3	40,155				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEST-FOOD EMPOWERMENT EDUCATION & SUSTAINABILITY TEAM 605 SW 108TH STREET SEATTLE, WA 98146	46-2680838	501(C)3	78,900				PROGRAM INVESTMENT
FILIPINO COMMUNITY OF SEATTLE 5740 M L KING JR WAY S SEATTLE, WA 98118	91-6055858	501(C)3	74,206				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD LIFELINE 815 S 96TH ST SEATTLE, WA 98108	91-1090450	501(C)3	127,642				PROG INVST & DESG GIFTS
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N SEATTLE, WA 98109	23-7156071	501(C)3	501,267				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREE RIDE ZONE 3709 S FERDINAND SEATTLE, WA 98118	91-1753062	501(C)3	17,500				PROGRAM INVESTMENT
FRIENDS OF THE CHILDREN- SEATTLE PO BOX 18886 SEATTLE, WA 98118	91-2047030	501(C)3	18,000				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF YOUTH 13116 NE 132ND ST KIRKLAND, WA 98034	91-0672501	501(C)3	199,469				PROG INVST & DESG GIFTS
GLOBAL-HELP ORGANIZATION 2318 FAIRVIEW AVE E UNIT 2 SEATTLE, WA 98102	41-2033943	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOVER EMPOWERMENTORING P O BOX 6471 KENT, WA 98031	47-1242835	501(C)3	49,510				PROGRAM INVESTMENT
GONZAGA PREPARATORY SCHOOL FOUNDATION OF SPOKANE WASHINGTON 1224 E EUCLID AVE SPOKANE, WA 99207	91-6072663	501(C)3	26,545				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SHEPHERD YOUTH OUTREACH PO BOX 25492 FEDERAL WAY, WA 98093	26-3713948	501(C)3	73,333				PROGRAM INVESTMENT
GOODWILL INDUSTRIES 1400 SOUTH LANE STREET SEATTLE, WA 98144	91-0568708	501(C)3	145,275				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRACE PRESBYTERIAN CHURCH OF PLANO FOUNDATION 4300 W PARK BLVD PLANO, TX 75093	75-1791587	501(C)3	10,500				DESIGNATED GIFT
GREEN RIVER COLLEGE FOUNDATION 12401 SE 320TH STREET AUBURN, WA 98092	51-0168649	501(C)3	60,000				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREYHOUND PETS INC PO BOX 891 WOODINVILLE, WA 98072	82-0434711	501(C)3	7,752				DESIGNATED GIFT
GRIST MAGAZINE INC 1201 WESTERN AVE STE 410 SEATTLE, WA 98101	06-1664153	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABITAT FOR HUMANITY INTERNATIONAL 560 NACHES AVE SW STE 110 RENTON, WA 98057	91-1342397	501(C)3	34,700				DESIGNATED GIFT
HADASSAH THE WOMENS ZIONIST ORGANIZATION OF AMERICA 140 LAKESIDE AVE STE A36 SEATTLE, WA 98122	91-0750738	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAMLIN ROBINSON SCHOOL 1701 20TH AVE S SEATTLE, WA 98144	91-1344121	501(C)3	11,124				DESIGNATED GIFT
HEALTHY MOTHERS HEALTHY BABIES COALITION OF WASHINGTON 155 NE 100TH ST SUITE 500 SEATTLE, WA 98125	91-1443685	501(C)3	280,800				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARING SPEECH & DEAF CENTER 1625 19TH AVE SEATTLE, WA 98122	91-0681207	501(C)3	6,164				PROGRAM INVESTMENT
HEARING SPEECH & DEAFNESS CENTER 1625 19TH AVE SEATTLE, WA 98122	91-0681207	501(C)3	29,214				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HERZL-NER TAMID CONSERVATIVE CONGREGATION PO BOX 574 MERCER ISLAND, WA 98040	91-0254210	501(C)3	15,000				DESIGNATED GIFT
HIGH POINT NORTH LIMITED PARTN 6558 35TH AVE SW SEATTLE, WA 98126	20-0363498	501(C)3	7,479				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHLANDS COMMUNITY CHURCH 3031 NE 10TH ST RENTON, WA 98056	91-0744548	501(C)3	11,250				DESIGNATED GIFT
HIGHLINE AREA FOOD BANK PO BOX 66427 BURIEN, WA 98166	91-1665389	501(C)3	10,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHLINE COLLEGE FOUNDATION PO BOX 98000 M/S 99-248 DES MOINES, WA 98198	23-7428279	501(C)3	56,250				PROGRAM INVESTMENT
HIGHLINE SCHOOLS FOUNDATION FOR EXCELLENCE 15675 AMBAUM BLVD SW BURIEN, WA 98166	91-2020506	501(C)3	20,525				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHLINWEST SEATTLE MENTAL HEALTH CENTER 2600 SW HOLDEN ST SEATTLE, WA 98126	91-0848698	501(C)3	43,878				PROG INVST & DESG GIFTS
HOPE FOR HEROISM 270 SOUTH HANFORD STREET STE 207 SEATTLE, WA 98134	91-2105756	501(C)3	25,000				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPELINK 10675 WILLOWS RD NE STE 275 REDMOND, WA 98052	91-0982116	501(C)3	124,527				PROG INVST & DESG GIFTS
HORN OF AFRICA SERVICES 4714 RAINIER AVE S STE 105 SEATTLE, WA 98118	91-1897087	501(C)3	242,828				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR SEATTLE-KING CO 13212 SE EASTGATE WAY BELLEVUE, WA 98005	91-0282060	501(C)3	24,863				DESIGNATED GIFT
IMMANUEL COMMUNITY SERVICES 1215 THOMAS ST SEATTLE, WA 98109	26-0881300	501(C)3	10,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERACTIONTRANSITION 1265 S MAIN STREET 305-B SEATTLE, WA 98144	51-0175651	501(C)3	120,000				PROGRAM INVESTMENT
INTERCULTURAL CHILDREN & FAMILY SERVICES 6320 EVERGREEN WAY STE 205 EVERETT, WA 98203	46-3280147	501(C)3	175,050				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INT'L DISTRICT HOUSING & SOCIAL SERVICES 601 SOUTH KING STREET SEATTLE, WA 98104	91-1061105	501(C)3	25,000				PROGRAM INVESTMENT
INT'L RESCUE COMMITTEE (WA) 1200 S 192ND ST STE 101 SEATTLE, WA 98148	13-5660870	501(C)3	15,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IRAQI COMMUNITY CENTER OF WASHINGTON 10610 SE KENT KANGLEY RD SUITE 207 KENT, WA 98030	61-1729234	501(C)3	195,842				PROGRAM INVESTMENT
ISLANDWOOD 4450 BLAKELY AVE NE BAINBRIDGE IS, WA 98110	31-1654076	501(C)3	15,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISSAQUAH FOOD & CLOTHING BANK 179 1ST AVE SE ISSAQUAH, WA 98027	91-1245499	501(C)3	5,610				DESIGNATED GIFT
JDRF INTERNATIONAL 26 BROADWAY 14TH FLOOR NEW YORK, NY 10004	23-1907729	501(C)3	7,232				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FAMILY SERVICE 1601 16TH AVE SEATTLE, WA 98122	91-0565537	501(C)3	74,549				PROG INVST & DESG GIFTS
JEWISH FEDERATION OF GREATER SEATTLE 2033 6TH AVE STE 810 SEATTLE, WA 98121	91-0575950	501(C)3	329,660				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH WOMENS RENAISSANCE PROJECT INC 6101 EXECUTIVE BLVD STE 240 ROCKVILLE, MD 20852	38-3852989	501(C)3	20,000				DESIGNATED GIFT
JUNIOR ACHIEVEMENT OF WASHINGTON 1700 WESTLAKE AVE N 100 SEATTLE, WA 98109	91-0604913	501(C)3	5,900				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENT FOOD BANK & EMERGENCY SERVICES 515 W HARRISON ST STE 107 KENT, WA 98032	91-0881434	501(C)3	18,382				PROG INVST & DESG GIFTS
KENT YOUTH & FAMILY SERVICES 232 S 2ND AVE RM 201 KENT, WA 98032	23-7090029	501(C)3	27,096				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDS WITHOUT BORDERS PO BOX 24 BELLEVUE, WA 98009	76-0723622	501(C)3	10,000				DESIGNATED GIFT
KIDSQUEST CHILDREN'S MUSEUM 1116 108TH AVE NE BELLEVUE, WA 98004	91-1828830	501(C)3	27,004				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIN ON HEALTH CARE CENTER 4416 S BRANDON ST SEATTLE, WA 98118	91-1620786	501(C)3	17,600				DESIGNATED GIFT
KIND INC 1201 L ST NW FL 2 WASHINGTON, DC 20005	26-2763038	501(C)3	75,050				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINDERING 16120 NE 8TH ST BELLEVUE, WA 98008	91-0816827	501(C)3	376,393				PROG INVST & DESG GIFTS
KING & KITSAP COUNTIES CHAPTER 1900-25TH AVE S SEATTLE, WA 98144	91-0565554	501(C)3	230,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KING COUNTY BAR ASSOCIATION 1200 FIFTH AVENUE SUITE 700 SEATTLE, WA 98101	91-0721603	501(C)3	128,442				PROGRAM INVESTMENT
KING COUNTY BAR FOUNDATION 1200 5TH AVE STE 700 SEATTLE, WA 98101	91-1079173	501(C)3	100,300				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KING COUNTY DEPARTMENT OF COMMUNITY AND HUMAN SERVICES 401 5TH AVE STE 500 SEATTLE, WA 98104	91-6001327	GOVERNMENT	603,750				DESIGNATED GIFT
KING COUNTY SEXUAL ASSAULT RESOURCE CENTER PO BOX 300 RENTON, WA 98057	91-0967255	GOVERNMENT	15,128				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE SAWYER CHRISTIAN CHURCH 31605 LAKE SAWYER RD SE BLACK DIAMOND, WA 98010	91-1076499	501(C)3	14,400				DESIGNATED GIFT
LAKE WASHINGTON GIRLS MIDDLE SCHOOL 810 18TH AVENUE SEATTLE, WA 98122	91-1835055	501(C)3	20,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAMBERT HOUSE 1818 15TH AVE SEATTLE, WA 98122	94-3036815	501(C)3	7,999				DESIGNATED GIFT
LEADERSHIP TOMORROW 1301 5TH AVE STE 1500 SEATTLE, WA 98101	91-1196293	501(C)3	16,342				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEGAL FOUNDATION OF WASHINGTON 1325 4TH AVE STE 1335 SEATTLE, WA 98101	91-1263533	501(C)3	25,500				DESIGNATED GIFT
LEGAL VOICE 907 PINE STREET NO 500 SEATTLE, WA 98101	91-1047900	501(C)3	10,200				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIFELONG 210 S LUCILE STREET SEATTLE, WA 98108	91-1215715	501(C)3	23,032				PROG INVST & DESG GIFTS
LIFEWIRE PO BOX 6398 BELLEVUE, WA 98008	91-1190193	501(C)3	216,709				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIQUID VELO 209B 16TH AVE SEATTLE, WA 98122	27-4072470	501(C)3	15,000				DESIGNATED GIFT
LISTEN AND TALK - EDUCATION FOR CHILDREN WITH HEARING LOSS 8610 8TH AVE NE SEATTLE, WA 98115	91-1728129	501(C)3	16,894				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOW INCOME HOUSING INSTITUTE 2407 FIRST AVE STE 200 SEATTLE, WA 98121	94-3155150	501(C)3	61,200				PROG INVST & DESG GIFTS
LUMEN ACADEMY 14461 156TH AVENUE NORTHEAST WOODINVILLE, WA 98072	82-3054345	501(C)3	40,295				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUTHERAN SOCIAL SERVICES OF WA & ID 115 NE 100TH ST STE 200 SEATTLE, WA 98125	93-0386860	501(C)3	15,380				PROG INVST & DESG GIFTS
MAPLE VALLEY COMMUNITY CENTER 22010 SE 248TH MAPLE VALLEY, WA 98038	51-0181410	501(C)3	22,680				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAPLE VALLEY FOOD BANK AND EMERGENCY SERVICES PO BOX 322 MAPLE VALLEY, WA 98038	91-6057006	501(C)3	21,476				PROG INVST & DESG GIFTS
MARY'S PLACE SEATTLE 1830 9TH AVE SEATTLE, WA 98101	27-2087950	501(C)3	632,802				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCER ISLAND YOUTH AND FAMILY SERVICES FOUNDATION 2040 84TH AVE SE MERCER ISLAND, WA 98040	94-3110148	501(C)3	9,300				DESIGNATED GIFT
METROPOLITAN SEATTLE JEWISH DAY SCHOOL 15749 NE 4TH ST BELLEVUE, WA 98008	91-1085790	501(C)3	8,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILLIONAIRE CLUB INC 2515 WESTERN AVE SEATTLE, WA 98121	91-0607513	501(C)3	255,550				PROG INVST & DESG GIFTS
MULTI-SERVICE CENTER PO BOX 23699 FEDERAL WAY, WA 98093	23-7120815	501(C)3	117,582				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF FLIGHT FOUNDATION 9404 E MARGINAL WAY S TUKWILA, WA 98108	91-0785826	501(C)3	100,800				DESIGNATED GIFT
MUSLIM HOUSING SERVICES 6727 RAINIER AVE S 26 SEATTLE, WA 98118	91-1987910	501(C)3	52,350				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL JUDICIAL COLLEGE 1664 N VIRGINIA ST RENO, NV 89557	94-2427596	501(C)3	10,000				DESIGNATED GIFT
NATIONAL MULTIPLE SCLEROSIS SOCIETY 192 NICKERSON ST STE 100 SEATTLE, WA 98109	91-0742424	501(C)3	10,106				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEIGHBORHOOD HOUSE 1225 S WELLER STREET STE 510 SEATTLE, WA 98144	91-0568305	501(C)3	1,549,802				PROG INVST & DESG GIFTS
NEW BEGINNINGS PO BOX 75125 SEATTLE, WA 98125	91-1005916	501(C)3	67,260				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW HORIZONS MINISTRIES 2709 3RD AVE SEATTLE, WA 98121	91-1250114	501(C)3	21,136				PROG INVST & DESG GIFTS
NORTH HELPLINE 12736 33RD AVE NE SEATTLE, WA 98125	91-1475182	501(C)3	10,550				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST HARVEST E M M PO BOX 12272 SEATTLE, WA 98102	91-0826037	501(C)3	13,319				DESIGNATED GIFT
NORTHWEST KIDNEY CENTERS 700 BROADWAY SEATTLE, WA 98122	91-6057438	501(C)3	5,189				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NW CENTER FOR THE RETARDED PO BOX 80827 SEATTLE, WA 98108	91-0786790	501(C)3	22,180				PROG INVST & DESG GIFTS
NW IMMIGRANT RIGHTS PROJECT 615 2ND AVE STE 400 SEATTLE, WA 98104	91-1393082	501(C)3	104,217				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLDDOG HAVEN PO BOX 1409 OAK HARBOR, WA 98277	65-1249528	501(C)3	6,129				DESIGNATED GIFT
OLIVE CREST ABUSED CHILDRENS FOUNDATION 2130 EAST FOURTH STREET STE 200 SANTA ANA, CA 92705	33-0367975	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE LIFE COMMUNITY CH 3524 NE 95TH ST SEATTLE, WA 98115	91-1231039	501(C)3	7,500				DESIGNATED GIFT
OPEN ARMS PERINATAL SERVICES 2524 16TH AVE S RM 207A SEATTLE, WA 98144	91-1868021	501(C)3	31,018				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN DOORS FOR MULTICULTURAL FAMILIES 24437 RUSSELL ROAD SUITE 110 KENT, WA 98032	27-1206272	501(C)3	103,333				PROGRAM INVESTMENT
OPERATION MOBILIZATION PO BOX 444 TYRONE, GA 30290	22-2513811	501(C)3	11,694				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPERATION SACK LUNCH PO BOX 4128 SEATTLE, WA 98194	91-1658187	501(C)3	25,000				PROGRAM INVESTMENT
ORGANIZATIONAL RESEARCH 1100 OLIVE WAY SEATTLE, WA 98101	91-1588023	FOR-PROFIT	120,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORION INDUSTRIES 1590 A STREET NE AUBURN, WA 98002	91-0727076	501(C)3	9,800				PROGRAM INVESTMENT
OUR REDEEMERS LUTHERAN CHURCH 2400 NW 85TH ST SEATTLE, WA 98117	91-6001971	501(C)3	9,800				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OVERLAKE CHRISTIAN CHURCH 9900 WILLOWS RD NE REDMOND, WA 98052	91-0863908	501(C)3	19,036				DESIGNATED GIFT
PACIFIC SCIENCE CENTER FOUNDATION 200 2ND AVE N SEATTLE, WA 98109	91-0750867	501(C)3	16,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARA LOS NINOS DE HIGHLINE 425 SW 144ST BURIEN, WA 98166	20-0502368	501(C)3	136,625				PROGRAM INVESTMENT
PARTNER IN EMPLOYMENT 21400 INTERNATIONAL BLVD SOUTH SEATAC, WA 98198	47-4274269	501(C)3	113,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATH 2201 WESTLAKE AVE STE 200 SEATTLE, WA 98121	91-1157127	501(C)3	41,200				DESIGNATED GIFT
PEACE FOR THE STREETS BY KIDS FROM THE STREETS 1411 EAST OLIVE WAY LWR SEATTLE, WA 98122	91-1921191	501(C)3	27,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHILANTHROPY NORTHWEST 2101 4TH AVENUE SUITE 650 SEATTLE, WA 98121	91-1110995	501(C)3	14,000				PROGRAM INVESTMENT
PHYSIO FOUNDATION PO BOX 196 KIRKLAND, WA 98083	46-4965783	501(C)3	5,378				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIKE MARKET SENIOR CENTER 85 PIKE STREET STE 200 SEATTLE, WA 98101	91-1034838	501(C)3	17,100				PROG INVST & DESG GIFTS
PIONEER COUNSELING SERVICES PO BOX 18377 SEATTLE, WA 98118	91-0791552	501(C)3	30,000				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD FEDERATION OF 123 WILLIAM ST10TH FLOOR NEW YORK, NY 10038	13-1644147	501(C)3	10,660				DESIGNATED GIFT
PLANNED PARENTHOOD OF THE GREAT NORTHWEST AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE, WA 98122	91-0686012	501(C)3	76,286				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLYMOUTH HOUSING GROUP 2113 3RD AVE SEATTLE, WA 98121	91-1122621	501(C)3	62,474				PROG INVST & DESG GIFTS
POWERFUL VOICES 1620 18TH AVE STE 100 SEATTLE, WA 98122	91-1679907	501(C)3	56,910				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA 02138	04-2103580	501(C)3	102,000				DESIGNATED GIFT
PRISONERS FOR CHRIST OUTREACH MINISTRIES PO BOX 1530 WOODINVILLE, WA 98072	94-3104375	501(C)3	9,740				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROGRESSIVE ANIMAL WELFARE SOCIETY INC PO BOX 1037 LYNNWOOD, WA 98046	91-6073154	501(C)3	7,655				DESIGNATED GIFT
PROJECT AMIGO 936 7TH ST STE B 168 NOVATO, CA 94945	68-0396073	501(C)3	6,200				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUGET SOUND LABOR AGENCY 2800 1ST AVE STE 126 SEATTLE, WA 98121	91-0927902	501(C)3	31,800				PROG INVST & DESG GIFTS
RAINIER ATHLETES 17215 SE 29TH CT BELLEVUE, WA 98008	81-3280079	501(C)3	30,350				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINIER SCHOLARS 2100 24TH AVE S STE 360 SEATTLE, WA 98144	91-2045918	501(C)3	29,440				PROG INVST & DESG GIFTS
RAINIER VALLEY CORPS 1225 S WELLER ST SEATTLE, WA 98144	47-4257834	501(C)3	351,288				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINIER VALLEY FOOD BANK 4205 RAINIER AVE S SEATTLE, WA 98118	91-1500768	501(C)3	38,916				PROG INVST & DESG GIFTS
REACH 3604 NE 10TH CRT RENTON, WA 98056	46-1187669	501(C)3	26,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RED EAGLE SOARING PO BOX 20175 SEATTLE, WA 98102	91-1862731	501(C)3	98,900				PROGRAM INVESTMENT
REDEEMING SOLES 500 AURORA AVE N SEATTLE, WA 98109	27-4936980	501(C)3	34,224				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REFUGEE WOMEN'S ALLIANCE 4008 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98108	91-1296964	501(C)3	255,411				PROG INVST & DESG GIFTS
RENTON AREA YOUTH & FAMILY SERVICES PO BOX 1510 RENTON, WA 98057	51-0152621	501(C)3	46,644				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RENTON ECUMENICAL ASSOCIATION OF CHURCHES 3604 NE 10TH CRT RENTON, WA 98056	46-1187669	501(C)3	5,250				PROGRAM INVESTMENT
RENTON HOUSING AUTHORITY 2900 NE 10TH STREET RENTON, WA 98056	91-1858846	501(C)3	15,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RENTON PARK CHAPEL 16760 128TH AVE SE RENTON, WA 98058	91-1286970	501(C)3	39,858				DESIGNATED GIFT
RENTON REGIONAL COMMUNITY FOUNDATION PO BOX 820 RENTON, WA 98057	23-7069988	501(C)3	5,710				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RENTON SCHOOL DISTRICT #403 300 SW 7TH ST RENTON, WA 98057	91-6001635	GOVERNMENT	5,430				PROGRAM INVESTMENT
RENTON TECHNICAL COLLEGE FDN 3000 NE 4TH ST RENTON, WA 98056	91-1590751	501(C)3	111,659				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RONALD MCDONALD HOUSE CHARITIES OF WESTERN WASHINGTON & ALASKA 5130 40TH AVE NE SEATTLE, WA 98105	91-1061043	501(C)3	6,390				DESIGNATED GIFT
ROSLYN PRESBYTERIAN CHURCH PO BOX 247 ROSLYN, WA 98941	91-1225028	501(C)3	22,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SACRED HEART 205 2ND AVE N SEATTLE, WA 98109	91-0581657	501(C)3	6,344				DESIGNATED GIFT
SAFE CROSSINGS FOUNDATION 1402 3RD AVENUE SUITE 1322 SEATTLE, WA 98101	75-2992774	501(C)3	13,660				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE PASSAGE 49 FARM VIEW DR STE 302 NEW GLOUCESTR, ME 04260	01-0532835	501(C)3	10,000				DESIGNATED GIFT
SAFEFUTURES YOUTH CENTER 6337 35TH AVENUE SW SEATTLE, WA 98126	91-1949779	501(C)3	30,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT JOHN CHRYSOSTOM BYZANTINE CATHOLIC CHURCH SEATTLE 1305 S LANDER ST SEATTLE, WA 98144	47-1423615	501(C)3	7,920				DESIGNATED GIFT
SAINT LOUISE 141 156TH AVE SE BELLEVUE, WA 98007	91-0724638	501(C)3	5,350				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAMMAMISH PRESBYTERIAN CHURCH 22522 NE INGLEWOOD HILL RD REDMOND, WA 98053	91-1364639	501(C)3	11,700				DESIGNATED GIFT
SAMUEL & ALTHEA STROUM JEWISH COMMUNITY CENTER 3801 E MERCER WAY MERCER ISLAND, WA 98040	91-0635236	501(C)3	27,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL'S OUT WASHINGTON 801 23RD AVENUE SOUTH SUITE A SEATTLE, WA 98144	91-0482890	501(C)3	250,000				PROGRAM INVESTMENT
SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105	31-1640316	501(C)3	50,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE AQUARIUM SOCIETY-SEAS 1483 ALASKAN WAY PIER 59 SEATTLE, WA 98101	91-1189249	501(C)3	12,000				DESIGNATED GIFT
SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101	91-0640788	501(C)3	138,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE CENTRAL COMMUNITY COLLEGE DIST6 FDN 1701 BROADWAY BE-4180H SEATTLE, WA 98122	91-1037870	501(C)3	24,000				PROG INVST & DESG GIFTS
SEATTLE CHILDRENS HOSPITAL FOUNDATION PO BOX 5371 MSC RC-507 SEATTLE, WA 98145	91-1156519	501(C)3	1,067,616				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE CHILDRENS THEATRE ASSOCIATION 201 THOMAS ST SEATTLE, WA 98109	51-0172421	501(C)3	9,000				DESIGNATED GIFT
SEATTLE COLLEGES - SOUTH SEATTLE 6000 16TH AVENUE SW SEATTLE, WA 981061499	91-0826872	501(C)3	27,550				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVENUE SEATTLE, WA 98122	83-0551671	501(C)3	150,000				PROGRAM INVESTMENT
SEATTLE COMMUNITY LAW CENTER 1404 E YESLER WAY STE 203 SEATTLE, WA 98122	91-1866898	501(C)3	100,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE EDUCATION ACCESS 6920 ROOSEVELT WAY NE STE 355 SEATTLE, WA 98115	04-3602577	501(C)3	526,864				PROG INVST & DESG GIFTS
SEATTLE FOUNDATION 1601 FIFTH AVENUE STE 1900 SEATTLE, WA 98101	91-6013536	501(C)3	45,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE MENNONITE CHURCH 3120 NE 125TH STREET SEATTLE, WA 98125	91-1447896	501(C)3	30,000				PROGRAM INVESTMENT
SEATTLE MENTAL HEALTH INSTITUTE 1600 E OLIVE ST SEATTLE, WA 98122	91-0818971	501(C)3	75,430				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE PREPARATORY SCHOOL 2400 11TH AVE E SEATTLE, WA 98102	91-0644000	501(C)3	25,250				DESIGNATED GIFT
SEATTLE PUBLIC SCHOOLS 2445 3RD AVENUE SOUTH SEATTLE, WA 98124	91-6001541	GOVERNMENT	112,933				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE REPERTORY THEATRE PO BOX 900923 SEATTLE, WA 98109	91-0756535	501(C)3	22,250				DESIGNATED GIFT
SEATTLE SHAKESPEARE FESTIVAL 305 HARRISON ST SEATTLE, WA 98109	91-1512717	501(C)3	12,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE SYMPHONY ORCHESTRA INC PO BOX 21906 SEATTLE, WA 98111	91-0667412	501(C)3	9,864				DESIGNATED GIFT
SEATTLE TILTH ASSOCIATION 4649 SUNNYSIDE AVE N SEATTLE, WA 98103	94-3261971	501(C)3	74,650				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE UNIVERSITY FOUNDATION 901 12TH AVE ADMIN 120 SEATTLE, WA 98122	91-1130769	501(C)3	320,500				DESIGNATED GIFT
SEATTLEKING COUNTY COALITION ON HOMELESSNESS 85 SOUTH WASHINGTON STREET STE 310 SEATTLE, WA 98104	91-0578229	501(C)3	10,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE-KING CNTY DEPT OF PUBLIC HEALTH 401 FIFTH AVENUE STE 1300 SEATTLE, WA 98104	91-6001327	GOVERNMENT	42,000				PROGRAM INVESTMENT
SEATTLE UNION GOSPEL MISSION 3800 S OTHELLO ST SEATTLE, WA 98118	91-0595029	501(C)3	46,910				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEREOLIPi NOMADIC EDUCATION FOUNDATION INC 104 WOOSTER STREET APT PHN NEW YORK, NY 10012	41-2189604	501(C)3	5,250				DESIGNATED GIFT
SERVICE BOARD THE 4408 DELRIDGE WAY SOUTH SEATTLE, WA 98016	20-0661802	501(C)3	15,250				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHORELINE COMMUNITY COLLEGE FOUNDATION 16101 GREENWOOD AVE N ROOM 1005 SHORELINE, WA 98133	91-1265475	501(C)3	56,250				PROGRAM INVESTMENT
SNOHOMISH COUNTY VOLUNTEER SEARCH & RESCUE UNIT INC 5506 OLD MACHIAS RD SNOHOMISH, WA 98290	91-0848877	501(C)3	5,090				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SNOQUALMIE VALLEY SHELTER SERVICES 7829 CENTER BLVD SE SUITE 239 SNOQUALMIE, WA 98065	81-5104730	501(C)3	40,000				PROGRAM INVESTMENT
SOLID GROUND 1501 N 45TH ST SEATTLE, WA 98103	23-7421892	501(C)3	178,359				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOMALI YOUTH AND FAMILY CLUB 19550 INTERNATIONAL BLVD SUITE 106B 106B SEATAC, WA 98188	27-0377330	501(C)3	95,000				PROGRAM INVESTMENT
SOUND CHILD CARE SOLUTIONS 1225 SOUTH WELLER STREET SEATTLE, WA 98144	02-0551791	501(C)3	75,000				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUNDVIEW COMMUNITY CHURCH 5018 10TH PL W EVERETT, WA 98203	81-1189121	501(C)3	7,867				DESIGNATED GIFT
SOUTH SOUND OUTREACH SERVICES 1106 MARTIN LUTHER KING JR WAY TACOMA, WA 98405	91-1741624	501(C)3	76,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHEAST YOUTH AND FAMILY SERVICES 3722 S HUDSON ST SEATTLE, WA 98118	91-1036750	501(C)3	210,838				PROGRAM INVESTMENT
SOUTHWEST VIPASSANA ASSOCIATION INC PO BOX 412 BEDFORD, TX 76095	75-2176826	501(C)3	7,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST YOUTH AND FAMILY SERVICES 4555 DELRIDGE WAY SW SEATTLE, WA 98106	91-1117862	501(C)3	1,066,023				PROG INVST & DESG GIFTS
ST ALOYSIUS PARISH 611 E MISSION AVE SPOKANE, WA 99202	91-1433780	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOSEPH PARISH 732 18TH AVE E SEATTLE, WA 98112	91-0588423	501(C)3	7,800				DESIGNATED GIFT
ST MATTHEWS EVANGELICAL LUTHERAN CHURCH 1700 EDMONDS AVE NE RENTON, WA 98056	91-1019006	501(C)3	13,440				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST MONICAS PARISH 4301 88TH AVE SE MERCER ISLAND, WA 98040	91-0724244	501(C)3	15,000				DESIGNATED GIFT
STOLENYOUTH PO BOX 296 SEATTLE, WA 98111	45-4985230	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMMER SEARCH 101 HOWARD STREET SUITE 250 SAN FRANCISCO, CA 98105	68-0200138	501(C)3	25,000				PROGRAM INVESTMENT
TEACH FOR AMERICA INC 25 BROADWAY 12TH FLOOR NEW YORK, NY 10004	13-3541913	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHBRIDGE GIRLS 114 LINDEN STREET OAKLAND, CA 94607	27-4162514	501(C)3	21,000				PROGRAM INVESTMENT
TEMPLE DE HIRSCH SINAI 1511 E PIKE ST SEATTLE, WA 98122	91-0437430	501(C)3	13,500				DESIGNATED GIFT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE AGAINST MALARIA FOUNDATION 301 W 20TH ST STE 300 KANSAS CITY, MO 64108	20-3069841	501(C)3	8,099				DESIGNATED GIFT
THE CARTER CENTER INC 453 FREEDOM PKWY NE ATLANTA, GA 30307	58-1454716	501(C)3	15,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COLLEGE OF WILLIAM & MARY FOUNDATION 5300 DISCOVERY PARK BLVD WILLIAMSBURG, VA 23188	54-0734117	501(C)3	13,800				DESIGNATED GIFT
THE MOUNTAINS TO SOUND GREENWAY TR 2701 1ST AVE STE 240 SEATTLE, WA 98121	91-1531234	501(C)3	5,075				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY A CALIFORNIA CORPORATION 111 QUEEN ANNE AVE N SEATTLE, WA 98109	91-0565002	501(C)3	198,606				PROG INVST & DESG GIFTS
THE SEATTLE ACADEMY OF ARTS AND SCIENCES 1201 E UNION ST SEATTLE, WA 98122	91-1223580	501(C)3	163,150				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SEATTLE FOUNDATION 1601 5TH AVE STE 1900 SEATTLE, WA 98101	91-6013536	501(C)3	85,000				DESIGNATED GIFT
THE SOPHIA WAY 11061 NE 2ND ST BELLEVUE, WA 98004	45-4084539	501(C)3	93,427				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRAC ASSOCIATES 215 SIXTH AVE N STE 100 SEATTLE, WA 98109	91-1247183	501(C)3	150,000				PROGRAM INVESTMENT
TRANSITIONAL RESOURCES 2970 SW AVALON WAY SEATTLE, WA 98126	91-0967836	501(C)3	18,498				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREEHOUSE 2100 24TH AVE S STE 200 SEATTLE, WA 98144	91-1425676	501(C)3	339,325				PROG INVST & DESG GIFTS
TRINITY EVANGELICAL LUTHERAN CHURCH 2324 LOMBARD AVE EVERETT, WA 98201	91-6036559	501(C)3	37,050				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK 615 WEST 131 STREET 4TH FLOOR NEW YORK, NY 10027	13-5598093	501(C)3	250,000				DESIGNATED GIFT
TRUSTEES OF PRINCETON UNIVERSITY PO BOX 291 PRINCETON, NJ 08544	22-3829468	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TUKWILA PANTRY 3118 S 140TH ST TUKWILA, WA 98168	75-2974441	501(C)3	15,120				PROG INVST & DESG GIFTS
UKRAINIAN COMMUNITY CTR OF WA 221 HARDIE AVENUE NW RENTON, WA 98055	91-1923155	501(C)3	14,583				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED INDIANS OF ALL TRIBES FOUNDATION PO BOX 99100 SEATTLE, WA 98139	91-0889016	501(C)3	197,265				PROG INVST & DESG GIFTS
UNITED SERVICES ORGANIZATIONS 17801 INTERNATIONAL BLVD PMB 313 SEATAC, WA 98158	91-0573116	501(C)3	13,948				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF CORINTH AND ALCORN COUNTY PO BOX 1104 CORINTH, MS 38835	64-0333592	501(C)3	24,000				DESIGNATED GIFT
UNITED WAY OF KITSAP COUNTY 645 4TH ST STE 101 BREMERTON, WA 98337	91-0623990	501(C)3	9,829				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF PIERCE COUNTY 1501 PACIFIC AVE STE 400 TACOMA, WA 98402	91-0650669	501(C)3	24,676				DESIGNATED GIFT
UNITED WAY OF SNOHOMISH COUNTY 3120 MCDOUGALL AVE STE 200 EVERETT, WA 98201	91-0606507	501(C)3	58,512				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE BAY AREA 550 KEARNY ST STE 1000 SAN FRANCISCO, CA 94108	94-1312348	501(C)3	9,144				DESIGNATED GIFT
UNIVERSITY OF NOTRE DAME DU LAC PAYROLL DEPARTMENT 5746317575 NOTRE DAME, IN 46556	35-0868188	501(C)3	26,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK LOS ANGELES, CA 90089	95-1642394	GOVERNMENT	97,908				DESIGNATED GIFT
UNIVERSITY OF WASHINGTON FOUNDATION 4333 BROOKLYN AVE NE SEATTLE, WA 98195	94-3079432	501(C)3	836,101				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY PRESBYTERIAN CHURCH 4540 15TH AVE NE SEATTLE, WA 98105	91-0564756	501(C)3	23,350				DESIGNATED GIFT
SEATTLE FOUNDATION 1601 5TH AVE STE 1900 SEATTLE, WA 98101	91-6013536	501(C)3	136,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN LEAGUE OF METROPOLITAN 105 - 14TH AVENUE SEATTLE, WA 981225569	91-0575954	501(C)3	305,914				PROGRAM INVESTMENT
URBAN LEAGUE OF METROPOLITAN SEATTLE 105 14TH AVENUE SEATTLE, WA 98122	91-0575954	501(C)3	916,021				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY CITIES COUNSELING & CONSULTATION 325 WEST GOWE ST KENT, WA 98032	91-6063183	501(C)3	233,390				PROG INVST & DESG GIFTS
VASHON MAURY COMMUNITY FOOD BANK PO BOX 1205 VASHON, WA 98070	94-3165664	501(C)3	28,500				PROGRAM INVESTMENT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIETNAMESE FRIENDSHIP ASSN OF SEATTLE 3829B S EDMUNDS ST SEATTLE, WA 98118	91-1122532	501(C)3	50,200				PROGRAM INVESTMENT
VILLAGE THEATRE 303 FRONT ST N ISSAQUAH, WA 98027	91-1077130	501(C)3	8,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VINE MAPLE PLACE PO BOX 1092 MAPLE VALLEY, WA 98038	91-2082308	501(C)3	45,654				PROG INVST & DESG GIFTS
VISION HOUSE PO BOX 2951 RENTON, WA 98056	91-1493474	501(C)3	5,262				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOICES OF TOMORROW 13975 INTERURBAN AVENUE SOUTH TUKWILA, WA 98168	46-5211499	501(C)3	263,627				PROGRAM INVESTMENT
WA CASH (WA COMMUNITY ALLIANCE FOR SELF- HELP) 2100 24TH AVE S STE 380 SEATTLE, WA 98144	91-1704028	501(C)3	37,500				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAPI COMMUNITY SERVICES 3722 S HUDSON STREET SEATTLE, WA 98118	91-1586900	501(C)3	95,000				PROGRAM INVESTMENT
WASHINGTON STEM CENTER 210 S HUDSON ST SEATTLE, WA 98134	27-2133169	501(C)3	25,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTONS NATIONAL PARK FUND 1904 3RD AVE STE 400 SEATTLE, WA 98101	01-0869799	501(C)3	5,200				DESIGNATED GIFT
WAYFIND 3642 33RD AVE SOUTH SUITE C4 SEATTLE, WA 98144	31-0098070	501(C)3	9,250				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WELLSPRING FAMILY SERVICES 1900 RAINIER AVE S SEATTLE, WA 98144	91-0567261	501(C)3	571,846				PROG INVST & DESG GIFTS
WEST AFRICAN COMMUNITY COUNCIL 6322 44TH AVENUE SOUTH SEATTLE, WA 98118	46-2838797	501(C)3	174,680				PROGRAM INVESTMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST SEATTLE FOOD BANK 3419 SW MORGAN ST SEATTLE, WA 98126	91-1464412	501(C)3	34,550				PROG INVST & DESG GIFTS
WESTSIDE BIBLE FELLOWSHIP 526 SE 9TH AVE HILLSBORO, OR 97123	93-0775006	501(C)3	11,466				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITE CENTER COMMUNITY 605 SW 108TH ST SEATTLE, WA 98146	72-1526567	501(C)3	12,650				PROGRAM INVESTMENT
WHITE CENTER FOOD BANK 10829 8TH AVE SW SEATTLE, WA 98146	91-1167830	501(C)3	21,420				PROG INVST & DESG GIFTS



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITEWATER CHURCH 1002 N MERIDIAN STE 100 PMB 297 PUYALLUP, WA 98371	81-2113314	501(C)3	7,200				DESIGNATED GIFT
WILLIAM JEWELL COLLEGE 500 COLLEGE HL LIBERTY, MO 64068	44-0545914	501(C)3	10,000				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMENS FUNDING ALLIANCE 2101 4TH AVE STE 1330 SEATTLE, WA 98121	91-1244815	501(C)3	30,192				DESIGNATED GIFT
WONDERLAND DEVELOPMENTAL CENTER 2402 NW 195TH PL SEATTLE, WA 98177	91-0890276	501(C)3	18,272				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD STE 300 JACKSONVILLE, FL 32256	20-2370934	501(C)3	12,140				DESIGNATED GIFT
YEAR UP INC 45 MILK STREET 9TH FLOOR BOSTON, MA 02109	04-3534407	501(C)3	28,500				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF GREATER SEATTLE 909 4TH AVE SEATTLE, WA 98104	91-0482710	501(C)3	321,421				PROG INVST & DESG GIFTS
YOUNG LIFE 420 N CASCADE AVE COLORADO SPGS, CO 80903	84-0385934	501(C)3	10,032				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG MENS CHRISTIAN ASSOCIATION OF SNOHOMISH COUNTY 2720 ROCKEFELLER AVE EVERETT, WA 98201	91-0565561	501(C)3	9,174				DESIGNATED GIFT
YOUTH EASTSIDE SERVICES (YES) 999 164TH AVE NE BELLEVUE, WA 98008	91-0849093	501(C)3	173,948				PROG INVST & DESG GIFTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH IN FOCUS 2100 24TH AVE S STE 310 SEATTLE, WA 98144	91-1821137	501(C)3	15,000				PROGRAM INVESTMENT
YOUTH THEATER NORTHWEST PO BOX 296 MERCER ISLAND, WA 98040	91-1261911	501(C)3	32,770				DESIGNATED GIFT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTHCARE 2500 NE 54TH ST 100 SEATTLE, WA 98105	91-0917079	501(C)3	303,560				PROG INVST & DESG GIFTS
YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY 1118 5TH AVE SEATTLE, WA 98101	91-0482890	501(C)3	918,126				PROG INVST & DESG GIFTS

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization  
UNITED WAY OF KING COUNTY

**Employer identification number**

91-0565555

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)          |

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**1b** Yes

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

**2** Yes

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

**a** Receive a severance payment or change-of-control payment?

**4a** No

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**4b** No

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

**4c** No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

**a** The organization?

**5a** No

**b** Any related organization?

**5b** No

If "Yes," on line 5a or 5b, describe in Part III

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

**a** The organization?

**6a** No

**b** Any related organization?

**6b** No

If "Yes," on line 6a or 6b, describe in Part III

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**7** No

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**8** No

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

**9**



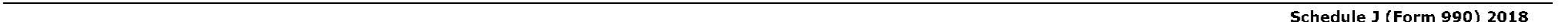
**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Schedule J (Form 990) 2018

**Part III**   **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	UNITED WAY OF KING COUNTY PAYS FOR AN ATHLETIC CLUB MEMBERSHIP FOR THE CHIEF EXECUTIVE OFFICER AND DOES NOT INCLUDE IT AS TAXABLE WAGES



SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.  
►Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
UNITED WAY OF KING COUNTY

Employer identification number  
91-0565555

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	74	6,047,299	FAIR MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( OTHER MISC )	X	16	49,652	FAIR MARKET VALUE
26 Other ► ( VIRTUAL CURRENCY )	X	1	10,000	FAIR MARKET VALUE
27 Other ► ( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

Yes

No

**Part II** **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE AMOUNTS REPORTED ON SCHEDULE M, PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED DURING THE YEAR

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury

Name of the organization  
UNITED WAY OF KING COUNTY

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018**

**Open to Public Inspection**

**Employer identification number**

91-0565555

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART I, LINE 6	THE ESTIMATE OF 362,014 HOURS INCLUDES SERVICE BY VOLUNTEERS IN BOARD/COMMITTEE WORK, DAY OF SERVICE, DIRECT SERVICE, COMMUNITY IMPACT, AND OTHER AREAS HOURS REPRESENT ESTIMATES BY ORGANIZATION STAFF KNOWLEDGEABLE OF THE FUNCTIONS THE VOLUNTEERS ARE PERFORMING IN

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	CHRIS CAPOSSELA AND LEIGH TONER HAVE A FAMILY RELATIONSHIP

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE REVIEW OF THE FORM 990 IS INITIALLY COMPLETED BY THE CONTROLLER, SR DIRECTOR OF FINANCIAL OPERATIONS, AND THE COO THE FORM 990 WILL BE PROVIDED TO THE FINANCE COMMITTEE FOR REVIEW AND OFFERED TO BOARD MEMBERS TO REVIEW AND PROVIDE FEEDBACK, COMMENTS, OR SUGGESTIONS PRIOR TO FILING THE FORM 990 WITH THE IRS



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, EACH BOARD MEMBER REVIEWS THE CONFLICT OF INTEREST AND ETHICS POLICY AFTER THE REVIEW, EACH BOARD MEMBER SIGNS THE POLICY AND RETURNS IT TO THE EXECUTIVE OFFICE TO BE KEPT ON FILE IF THERE IS FOUND TO BE A CONFLICT OF INTEREST, IT IS REPORTED TO THE BOARD PRESIDENT AND THE CEO, AND THE BOARD MEMBER IS ASKED TO RECUSE HIM OR HERSELF FROM ANY VOTE ON THE MATTER

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	ANNUALLY, THE CEO'S SALARY IS REVIEWED BY THE EXECUTIVE COMMITTEE AND APPROVED BY THE BOARD ANNUALLY, THE CHIEF OPERATING OFFICER'S AND THE VICE PRESIDENTS SALARIES ARE REVIEWED AND APPROVED BY THE CHIEF EXECUTIVE OFFICER

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CURRENT AUDITED FINANCIAL STATEMENTS AND THE CURRENT IRS FORM 990 ARE AVAILABLE ON OUR WEB SITE OUR CONFLICT OF INTEREST POLICY AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON WRI TTEN REQUEST

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII, LINE 1F	FORM 990, PART VIII, LINE 1F INCLUDES DONOR DESIGNATIONS WHICH ARE CONTRIBUTIONS DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY CAMPAIGN RESULTS \$43,516,384 AS REPORTED ON FORM 990 LESS DONOR DESIGNATIONS \$20,101,005 NET CAMPAIGN REVENUE \$23,415,379

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 1	FORM 990, PART IX, LINE 1 INCLUDES DONOR DESIGNATIONS WHICH ARE CONTRIBUTIONS DESIGNATED TO NONPROFIT ORGANIZATIONS OTHER THAN UNITED WAY OF KING COUNTY GRANT FUNDS AWARDED & DESIGNATED \$44,369,937 AS REPORTED ON FORM 990 LESS DONOR DESIGNATIONS \$20,101,005 NET FUNDS AWARDED \$24,268,932