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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

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

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

C Name of organization
SEATTLE INTERNATIONAL FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1200 FIFTH AVENUE NO 1300

City or town, state or country, and ZIP + 4
SEATTLE, WA 981013151

D Employer identification number
20-8350995

E Telephone number
(206) 622-2294

G Gross receipts $ 1,379,283

F Name and address of principal officer
MOLLY STEARNS
1200 FIFTH AVENUE NO 1300
SEATTLE, WA 981013151

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

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2007

M State of legal domicile WA

Part I Summary

Activities & Governance

1	Briefly describe the organization's mission or most significant activities SEATTLE INTL FOUNDATION IS ORGANIZED & OPERATED AS A SUPPORTING ORG TO THE SEATTLE FOUNDATION		
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	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	2
5	Total number of employees (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	3
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	30,255,431	10,666
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	265,080	396,397
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,109
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,520,511	410,172
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,197,500	2,181,767
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	111,834	221,592
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	176,493	263,541
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,485,827	2,666,900
	19	Revenue less expenses Subtract line 18 from line 12	29,034,684	-2,256,728
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	22,164,244	20,032,942
	21	Total liabilities (Part X, line 26)	33,625	5,482
	22	Net assets or fund balances Subtract line 21 from line 20	22,130,619	20,027,460

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

****** | 2010-05-03
Signature of officer | Date

MOLLY STEARNS SECRETARY/TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	JANE M SEARING	Date	Check if self-empolyed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4	CLARK NUBER PS 10900 NE 4TH STREET SUITE 1700 BELLEVUE, WA 98004			EIN ▶ Phone no ▶ (425) 454-4919

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

SUPPORTING ORGANIZATION UNDER IRC SEC 509(A)(3)

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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 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

4a (Code) (Expenses $ 2,499,725 including grants of $ 2,181,767) (Revenue $)

SEATTLE INTERNATIONAL FOUNDATION IS ORGANIZED AND OPERATED AS A SUPPORTING ORGANIZATION TO THE SEATTLE FOUNDATION THE SEATTLE FOUNDATION MAKES GRANTS FOR THE BENEFIT OF THE RESIDENTS OF THE GREATER PUGET SOUND AREA SEATTLE INTERNATIONAL FOUNDATION MAKES GRANTS TO FURTHER THE SEATTLE FOUNDATION'S CHARITABLE PURPOSE

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 2,499,725

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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*	6		No
7	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*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11		No
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• 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.*			
	• 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.*			
	• 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.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• 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? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* (12A: Yes)			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	**1a**	0			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**		
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	**2a**	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			**2b**		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**		No
b	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			**8**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				

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.

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a 5			
b	Enter the number of voting members that are independent	1b 2			
2	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?		2	Yes	
3	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?		3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		No
14	Does the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

JEFFREY RUDD
1200 FIFTH AVENUE 1300
SEATTLE, WA 98101
(206) 622-2294

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees 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 the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
WILLIAM CLAPP PRESIDENT	1 00	X		X				0	0	0
PAULA CLAPP VICE PRESIDENT	1 00	X		X				0	0	0
MOLLY STEARNS SECRETARY/TREASURER	1 00	X		X				0	169,325	17,491
PHYLLIS CAMPBELL TRUSTEE	1 00	X						0	56,538	6,180
THOMAS WALDRON SECRETARY	1 00	X		X				0	0	0
MAURICIO VIVERO EXECUTIVE DIRECTOR	40 00			X				133,754	0	11,944

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
1b Total . . . . ▶								133,754	225,863	35,615

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶1

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**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? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(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 in compensation from the organization ▶0

Part VIII Statement of Revenue

Section	Line	Description	Sub-line	Amount	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,666				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f			10,666			
Program Service Revenue				Business Code				
	2a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f						
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			365,508			365,508
	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		1,000,000				
	b	Less cost or other basis and sales expenses		969,111				
	c	Gain or (loss)		30,889				
	d	Net gain or (loss)			30,889			30,889
	8a	Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events						
	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	ADMINISTRATIVE FEES		900,099	3,109			3,109
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d			3,109			
	12	**Total revenue.** See Instructions			410,172	0	0	399,506

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) but are not required to complete columns (B), (C), and (D).

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
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,156,767	2,156,767		
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	25,000	25,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	145,698	101,989	43,709	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	36,835	25,784	11,051	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,242	1,569	673	
9 Other employee benefits	23,600	16,520	7,080	
10 Payroll taxes	13,217	9,252	3,965	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising *See Part IV, line 17* . .				
f Investment management fees	50,929	35,650	15,279	
g Other	61,288	42,902	18,386	
12 Advertising and promotion				
13 Office expenses	13,359	9,351	4,008	
14 Information technology	10,108	7,075	3,033	
15 Royalties . .				
16 Occupancy	30,029	21,021	9,008	
17 Travel	15,041	15,041		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,078	5,078		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	583	408	175	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a ADMINISTRATIVE FEES	69,174	20,752	48,422	
b DUES & SUBSCRIPTIONS	6,655	4,658	1,997	
c ORGANIZATIONAL COSTS	1,117	782	335	
d				
e				
f All other expenses	180	126	54	
25 **Total functional expenses.** Add lines 1 through 24f	2,666,900	2,499,725	167,175	0
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1	15,064
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	6,863	4	15,124
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	2,240	9	
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	21,555,141	11	19,002,754
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11	600,000	13	1,000,000
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	22,164,244	16	20,032,942
Liabilities	17	Accounts payable and accrued expenses	33,625	17	5,482
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	33,625	26	5,482
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	22,130,619	27	20,027,460
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	22,130,619	33	20,027,460
	34	Total liabilities and net assets/fund balances	22,164,244	34	20,032,942

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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 . . .	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

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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.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

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

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

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

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

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

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 organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

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

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

a ☑ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

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

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

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

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

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

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section (see instructions))	**(iv)** Is the organization in col (i) listed in your governing document? Yes	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	No	**(vii)** Amount of support?
THE SEATTLE FOUNDATION	916013536	7	Yes		Yes		Yes		2,250,941
Total									2,250,941

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
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 **Total.** Add lines 1 through 3						
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)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) | 12 |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 |

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** 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 **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2005	**(b)** 2006	**(c)** 2007	**(d)** 2008	**(e)** 2009	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2008 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2009.** 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—2008.** 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 **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation
Schedule A, Part IV, Supplemental Information SCHEDULE A, PART I, LINE 11H, COLUMN (VII)- AMOUNT OF SUPPORT PAID GRANTS PAID TO THE SEATTLE FOUNDATION 150,000 AMOUNTS FOR THE BENEFIT OF THE SEATTLE FOUNDATION 2,031,767 EXPENSES PAID TO THE SEATTLE FOUNDATION 69,174 TOTAL 2,250,941

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** 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 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees or agents in region	**(d)** Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for region
CENTRAL AMERICA	0	0	grants to recipients located in the region	n/a	25,000
Totals . . . . . ►	0	0			25,000

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☑
Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA	TO SUPPORT THE OLA JOVEN PROGRAM	25,000	WIRE TRANSFER		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 WE CONDUCT PRE-GRANT INQUIRIES, HAVE GRANT AGREEMENTS, PROVIDE A SEPARATE ACCOUNTING OF THE FUNDS, AND INVESTIGATE ANY DIVERSIONS FOR ALL GRANTS LEAVING THE US, EXCLUDING MEXICO THE GRANTEE IS EXPECTED TO PROVIDE A REPORT ON HOW THE MONEY WAS SPENT AND WHAT PROGRAM AREAS WERE IMPACTED

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

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 Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 35

3 Enter total number of other organizations . . . . ▶ 0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 DUE DILIGENCE IS PERFORMED ON ALL GRANT RECOMMENDATIONS BY THE PROGRAM AND DONOR SERVICES ASSOCIATE GRANTS ARE REVIEWED AND APPROVED BY THE SUPPORTING ORGANIZATION BOARD OR THE SUPPORTING ORGANIZATION GRANT COMMITTEE PRIOR TO DISTRIBUTION A QUORUM MUST BE MET FOR DISTRIBUTION

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 20-8350995
Name: SEATTLE INTERNATIONAL FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ACTION AID USA1420 K ST NW STE 900 WASHINGTON, DC 200052507	52-2277575	509(A)(1) or (A)(2)	25,000		N/A	N/A	TO SUPPORT ACTION AID GUATEMALA'S PROJECT TO INCREASE EDUCATIONAL OPPORTUNITIES FOR CHILDREN
AGROS INTERNATIONAL 2225 4TH AVE 2ND FL SEATTLE, WA 98121	91-1276578	509(A)(1) or (A)(2)	12,500		N/A	N/A	TO HELP EXPAND THE WOMEN'S COMMUNITY BANKING PROGRAM IN CENTRAL AMERICA IMPACTING 120 RURAL WOMEN AND 581 CHILDREN
AMERICAN FRIENDSHIP FOUNDATIONPO BOX 611 BOTHELL, WA 980410611	91-1691404	509(A)(1) or (A)(2)	12,500		N/A	N/A	TO COMPLETE CONSTRUCTION OF A SCHOOL THAT WILL PROVIDE EDUCATION TO 1,400 STUDENTS IN A POOR REGION OF AFGHANISTAN
AMIGOS DE SANTA CRUZ PO BOX 148 LOPEZ ISLAND, WA 982610148	91-2155843	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT ONGOING CONSTRUCTION OF VOCATIONAL TRAINING CENTER IN SANTA CRUZ, GUATEMALA
ASAPROSARPO BOX 5348 BRADFORD, MA 01835	04-3301725	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT EMERGENCY RELIEF EFFORTS IN EL SALVADOR
ASHOKA INNOVATORS FOR THE PUBLIC1700 N MOORE ST STE 2000 ARLINGTON, VA 222091921	51-0255908	509(A)(1) or (A)(2)	32,500		N/A	N/A	TO SUPPORT THE YOUTH VENTURE LEADERSHIP PROJECT IN EL SALVADOR
BAHIA STREET1005 NE BOAT ST SEATTLE, WA 98105	91-1841926	509(A)(1) or (A)(2)	11,954		N/A	N/A	TO SUPPORT THE LITERACY AND LEARNING PROJECT TO TRAIN STAFF AND DEVELOP CURRICULUM TO PREPARE YOUNG WOMEN TO BENEFIT FROM THE REGULAR BAHIA STREET PROGRAM IN SALVADOR, BRAZIL
CENTER FOR GLOBAL DEVELOPMENT1776 MASSACHUSETTS AVE NW STE 301 WASHINGTON, DC 200361915	52-2351337	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
CENTER FOR US GLOBAL ENGAGEMENT1220 19TH STREET NW SUITE 300 WASHINGTON, DC 20036	74-3093659	509(A)(1) or (A)(2)	25,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
DESMOND TUTU PEACE FOUNDATION205 E 64TH ST RM 404 NEW YORK, NY 100656635	13-4092458	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT PLANNING AND CONTENT DEVELOPMENT FOR THE YPEACE ORG PROJECT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
DUE PROCESS OF LAW FOUNDATION1779 MASSACHUSETTS AVE NW SUITE 510A WASHINGTON, DC 20036	52-1973930	509(A)(1) or (A)(2)	30,000		N/A	N/A	TO SUPPORT EFFORTS TO IDENTIFY AND PROVIDE TECHNICAL SUPPORT TO LEGAL & HUMAN RIGHT ORGANIZATIONS BASED IN CENTRAL AMERICA WORKING WITH VULNERABLE POPULATIONS
EARTH ECONOMICS1121 TACOMA AVE S TACOMA, WA 984022005	20-1843411	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT EFFORTS TO PERFORM AN ECOLOGICAL ECONOMIC ASSESSMENT TO USE LOCALLY AND INTERNATIONALLY IN ORDER TO CONFRONT COPPER AND MINING OPERATIONS
EARTHCORPS6310 NE 74TH ST STE 201E SEATTLE, WA 981158168	91-1592071	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT PARTICIPATION OF 4 LATIN AMERICAN CONSERVATION LEADERS IN EARTHCORPS INTERNATIONAL PROGRAM
ENVIRONMENTAL LAW ALLIANCE WORLDWIDE 1877 GARDEN AVE EUGENE, OR 974031927	94-3116602	509(A)(1) or (A)(2)	25,000		N/A	N/A	TO SUPPORT ELAW EFFORTS TO CONVENE GRASSROOTS ADVOCATES FROM CENTRAL AMERICA WHO ARE WORKING TO STRENGTHEN THE RULE OF LAW AND ADVANCE SUSTAINABLE DEVELOPMENT IN THE REGION FOR A THREE-DAY LEADERSHIP AND CAPACITY BUILDING CONFERENCE
FOUNDATION FOR MANAGEMENT EDUCATION IN CENTRAL AMERICAPO BOX 639 GLEN ECHO, MD 20812	54-1492775	509(A)(1) or (A)(2)	50,000		N/A	N/A	TO SUPPORT THE CENTRAL AMERICAN LEADERSHIP INITIATIVE
GLOBAL FUND FOR WOMEN 222 SUTTER STREET SUITE 500 SAN FRANCISCO, CA 94108	77-0155782	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO THE PROGRAM AND GRANTEES IN CENTRAL AMERICA
GLOBAL PARTNERSHIPS 909 NE BOAT ST STE 200 SEATTLE, WA 981056672	82-0574491	509(A)(1) or (A)(2)	1,394,390		N/A	N/A	TO SUPPORT OPERATIONS AND THE EXPANSION OF PROGRAMS, AND ODEF'S PROJECT IN HONDURAS
GLOBAL VISIONARIES2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) or (A)(2)	19,250		N/A	N/A	TO SUPPORT EVENT "FIESTA GUATEMALA" ($750), A 5 YEAR COMPREHENSIVE PLAN AND OUTCOMES AND PERSONAL IMPACT EVALUATION ($15,0000), AND PARTICIPATION IN THE CENTRAL AMERICAN YOUTH PARLIAMENT ($3,500)
HEAL AFRICAPO BOX 147 MONROE, WA 982720147	20-4104936	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO IMPROVE U S OPERATIONS FOR ORGANIZATION THROUGH WEBSITE, DONOR MANAGEMENT AND MEDIA CAPACITY
HEALING THE CHILDREN - NATIONALPO BOX 9065 SPOKANE, WA 992099065	91-1177835	509(A)(1) or (A)(2)	12,500		N/A	N/A	TO SUPPORT THE CONSTRUCTION OF CLINIC AND HEALTH EDUCATION CENTER AND ONGOING WORK TO DEVELOP AND OPERATIONAL SYSTEM FOR STAFFING, HEALTHCARE AND EDUCATION IN GUATEMALA

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ILEAP THE CENTER FOR CRITICAL SERVICEPO BOX 15405 SEATTLE, WA 981150405	20-1347313	509(A)(1) or (A)(2)	15,000		N/A	N/A	TO SUPPORT THE RECRUITMENT AND TRAINING OF 5 FELLOWS FOR SEATTLE PROGRAMS FOCUSED ON CIVIC LEADERS IN DEVELOPING COUNTRIES
INITIATIVE FOR GLOBAL DEVELOPMENT1215 4TH AVE STE 650 SEATTLE, WA 981611007	20-8003146	509(A)(1) or (A)(2)	60,000		N/A	N/A	TO SPONSOR THEIR 2009 SUMMIT ($10,000) AND GENERAL OPERATING SUPPORT ($50,000)
LITERACY BRIDGEPO BOX 1256 SEATTLE, WA 981111256	26-1335205	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT AN EVALUATION PROJECT TO MEASURE THE IMPACT BEFORE SCALING UP TO OTHER REGIONS
ONEWORLD NOW600 1ST AVE STE 600 SEATTLE, WA 981042215	94-3213100	509(A)(1) or (A)(2)	15,000		N/A	N/A	TO ENSURE ACCESS OF LOW-INCOME STUDENTS TO GLOBAL LEADERSHIP OPPORTUNITIES THROUGH A CHINESE AND ARABIC LANGUAGE AND STUDY ABROAD PROGRAM
PEACE TREES VIETNAM 2200 ALASKAN WAY SUITE 435 SEATTLE, WA 98121	20-1051471	509(A)(1) or (A)(2)	17,500		N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT ($5,000) AND SUPPORT GENERAL OPERATING COSTS OF ORDINANCE REMOVAL AND CONSERVATION PROGRAM IN QUANG TRI PROVINCE, VIETNAM ($12,500)
PHILANTHROPY NORTHWEST2505 3RD AVE STE 200 SEATTLE, WA 981211494	91-1110995	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT THE DEVELOPMENT OF A NEW SECTION ON INTERNATIONAL PHILANTHROPY FOR THE 2009 TRENDS IN GIVING REPORT
PROSTHETICS OUTREACH FOUNDATION400 E PINE ST STE 225 SEATTLE, WA 981222300	91-1453216	509(A)(1) or (A)(2)	12,500		N/A	N/A	TO SUPPORT GENERAL OPERATING COSTS OF PROVIDING PROSTHETICS, ORTHOPEDIC SURGERY, TREATMENT FOR CLUB FOOT AND MICRO-LOANS IN BANGLADESH
RURAL DEVELOPMENT INSTITUTE1411 4TH AVE STE 910 SEATTLE, WA 981012204	91-1158970	509(A)(1) or (A)(2)	15,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
RWANDA GIRLS INITIATIVEPO BOX 272 MEDINA, WA 980390272	26-3503023	509(A)(1) or (A)(2)	12,500		N/A	N/A	TO SUPPORT CONSTRUCTION OF THE GASHORA GIRLS ACADEMY AND FARM IN RWANDA IN PARTNERSHIP WITH THE LOCAL GOVERNMENT
SEATTLE UNIVERSITY901 12TH AVE SEATTLE, WA 981224411	91-0565006	509(A)(1) or (A)(2)	25,000		N/A	N/A	TO SUPPORT THE INTERNATIONAL DEVELOPMENT INTERNSHIP PROGRAM (IDIP)

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
TEENSMART INTERNATIONALDUMC 3322 307 TRENT DRIVE DURHAM,WA 22710	20-0311647	509(A)(1) or (A)(2)	15,000		N/A	N/A	TO EXTEND HEALTH AND LEADERSHIP TRAINING FOR 100 TEENS IN NICARAGUA THROUGH WEB-BASED CURRICULUM
THE SEATTLE FOUNDATION GLOBAL WASHINGTON FUND1200 5TH AVE STE 1300 SEATTLE,WA 981013151	91-6013536	509(A)(1) or (A)(2)	150,000		N/A	N/A	TO SUPPORT RESEARCH, ANALYSIS AND PRINTING OF THE PROFILE OF WASHINGTON STATE'S DEVELOPMENT SECTOR REPORT ($15,000), $75,000 FOR GENERAL OPERATING SUPPORT, $10,000 FOR THE NPR PROGRAM FOR MEMBERS, AND $50,000 FOR GENERAL SUPPORT
UNIVERSITY OF WASHINGTON FOUNDATIONBOX 351210 401 ADMINISTRATION BLDG AI-10 SEATTLE,WA 981951210	94-3079432	509(A)(1) or (A)(2)	25,000		N/A	N/A	TO SUPPORT GLOBAL SOCIAL ENTREPRENEURSHIP COMPETITION ($10,000) $15,000 ALLOCATED TO THE CENTER FOR HUMAN RIGHTS IN SUPPORT OF CENTRAL AMERICAN RESEARCH-ADVOCACY PARTNERSHIPS
WATER 1ST INTERNATIONALPO BOX 17974 SEATTLE,WA 981271954	20-2601035	509(A)(1) or (A)(2)	10,000		N/A	N/A	TO SUPPORT CONSTRUCTION OF WATER AND SANITATION SYSTEM IN CHIMSAL, HONDURAS FOR 654 HOUSEHOLDS
WORLD AFFAIRS COUNCIL 2200 ALASKAN WAY STE 450 SEATTLE,WA 981213600	91-0586924	509(A)(1) or (A)(2)	20,000		N/A	N/A	TO SUPPORT THE 2009 GLOBAL LEADERSHIP SERIES ($5,000), SPONSOR THE PACIFIC NORTHWEST GLOBAL DONORS CONFERENCE ($10,000), AND TO SUPPORT THE 2009-2010 GLOBAL LEADERSHIP SERIES ($5,000)

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ 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 orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in 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? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in 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? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in 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? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
MOLLY STEARNS	(i) (ii)	147,325		22,000	16,800	691	186,816	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		WILLIAM CLAPP AND PAULA CLAPP HAVE A FAMILY RELATIONSHIP
Form 990, Part VI, Section A, line 6		THERE ARE TWO CLASSES OF MEMBERS IN THE BYLAWS FOR THE ORGANIZATION THE FIRST CLASS IS DESIGNATED TO THE FOUNDATION MEMBER AND THE SECOND CLASS IS DESIGNATED TO THE DONOR MEMBER THE FOUNDATION MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE FOUNDATION DIRECTOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO THREE VOTES IN ALL VOTING MATTERS THE DONOR MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE DONOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO TWO VOTES IN ALL VOTING MATTERS
Form 990, Part VI, Section A, line 7a		THE FOUNDATION MEMBER IS ABLE TO ELECT THE FOUNDATION CLASS OF THE BOARD AND THE DONOR MEMBER IS ABLE TO ELECT THE DONOR CLASS OF THE BOARD
Form 990, Part VI, Section A, line 7b		THE DECISIONS OF THE ORGANIZATION ARE SUBJECT TO THE APPROVAL OF THE SEATTLE FOUNDATION, DUE TO THE SEATTLE FOUNDATION HOLDING THE MAJORITY OF VOTES
Form 990, Part VI, Section B, line 11		THE ENTIRE BOARD IS PROVIDED A COPY OF THE RETURN PRIOR TO FILING SUFFICIENT TIME IS ALLOWED FOR REVIEW AND QUESTIONS BEFORE THE RETURN IS FILED THE FOUNDATION MEMBER IS DESIGNATED TO REVIEW AND SIGN THE RETURN
Form 990, Part VI, Section B, line 12c		CONFLICT OF INTEREST POLICIES ARE SIGNED YEARLY BY ALL BOARD MEMBERS AND TRUSTEES SEE PROCEDURES FOR COMPLIANCE BELOW A THE SUPPORTING ORGANIZATION MAINTAINS A LIST OF ALL PERSONS AND ENTITIES WHO ARE SUBSTANTIAL CONTRIBUTORS OR DISQUALIFIED PERSONS WITH RESPECT TO THE SUPPORTING ORGANIZATION THE SECRETARY OF THE SUPPORTING ORGANIZATION IS RESPONSIBLE FOR REVIEWING THESE LISTS FOR ACCURACY ON AN ANNUAL BASIS, UPDATING THE LISTS AS NEEDED, AND PROVIDING THE SEATTLE FOUNDATION WITH THESE LISTS AND ALL UPDATES B THE SUPPORTING ORGANIZATION ENSURES THAT PRIOR TO DISTRIBUTION OF ANY FUNDS, AN AGENT OF THE SUPPORTING ORGANIZATION CONFIRMS THAT THE DISTRIBUTION DOES NOT RESULT IN A PROHIBITED DISTRIBUTION UNDER THE CONFLICT OF INTEREST POLICY C ANY PAYMENT BY THE SUPPORTING ORGANIZATION TO A SUBSTANTIAL CONTRIBUTOR, RELATED PERSONS OR ENTITIES THAT IS NOT PROHIBITED BY THE CONFLICT OF INTEREST POLICY MUST BE APPROVED BY THE SEATTLE FOUNDATION'S DIRECTOR OF DONOR SERVICES, OR HIS OR HER DESIGNEE D THE SUPPORTING ORGANIZATION REQUIRES THAT PRIOR TO MAKING ANY PAYMENT OR PROVIDING ANY NON-INCIDENTAL BENEFIT TO A DISQUALIFIED PERSON OTHER THAN A SUBSTANTIAL CONTRIBUTOR OR RELATED PERSON OR ENTITY, SUCH PAYMENT OR BENEFIT MUST BE APPROVED BY THE SUPPORTING ORGANIZATION BOARD OF TRUSTEES AS IF SUCH DISQUALIFIED PERSON WERE A "COVERED PERSON" IN ACCORDANCE WITH THE SUPPORTING ORGANIZATION'S CONFLICT OF INTEREST POLICY
Form 990, Part VI, Section B, line 15a		COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD MEMBERS THEY COMPILED SALARY INFORMATION FOR AN INDIVIDUAL IN A SIMILAR POSITION AND DETERMINED THE AVERAGE SALARY THE BOARD OF DIRECTORS FOR SEATTLE INTERNATIONAL FOUNDATION APPROVED THE SALARY THE OTHER OFFICERS OF THE BOARD ARE UNCOMPENSATED BY SEATTLE INTERNATIONAL FOUNDATION
Form 990, Part VI, Section C, line 19		THE SUPPORTING ORGANIZATION MAINTAINS COPIES OF THESE DOCUMENTS AND MAKES THEM AVAILABLE FOR INSPECTION DURING REGULAR BUSINESS HOURS AT THE ORGANIZATIONS PRINCIPAL OFFICE THE ORGANIZATION ALSO COMPLIES WITH ALL REQUEST (WRITTEN OR VERBAL) FOR COPIES OF THESE DOCUMENTS

Identifier	Return Reference	Explanation
FORM 990, PART I, LINE 6 Volunteers		THERE ARE THREE VOLUNTEER BOARD MEMBERS

FORM 990, PART VIII, LINE 7 NET GAIN OR (LOSS) THE NET LOSS REPRESENTS LOSSES ON SALES OF SECURITIES ALL SECURITIES ARE HELD IN TRUSTS AND THE LARGE NUMBER OF TRANSACTION PREVENTS THE TAXPAYER FROM DETAILING THE SELLING PRICE AND COST OF EACH INDIVIDUAL SALE

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
SEATTLE INTERNATIONAL FOUNDATION

Employer identification number
20-8350995

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity

See Additional Data Table

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	Yes	
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o	Yes	
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	THE SEATTLE FOUNDATION	B	150,000
(2)	THE SEATTLE FOUNDATION	L	69,174
(3)	TSF SERVICES	L	235,579
(4)	TSF SERVICES	O	235,579
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	**No**		**Yes**	**No**		**Yes**	**No**

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 20-8350995
Name: SEATTLE INTERNATIONAL FOUNDATION

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
THE SEATTLE FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6013536	SERVES CHARITABLE ORGANIZATIONS IN THE GREATER SEATTLE AREA	WA	501(C)(3)	7	N/A
DONNA BENAROYA FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2002449	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE BROTMAN FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1996498	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE II	N/A
THE LUINO AND MARGARET DELL'OSSO FAMILY FUND 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1873773	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
DILLON FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2079177	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE GEORGE P HARDGROVE FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6061389	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE HOOD FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1755460	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE KAUFFMAN FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1575122	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE MCKIBBEN MERNER FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 13-4290879	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
REGIS FAMILY COMMUNITY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 61-1480303	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
ROBERTS-BECKER FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2173912	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
TSF PROPERTIES 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2016094	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE RUDOLF FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1730983	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
GLENHOME TRUST 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6053623	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
TSF SERVICES 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2008707	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE DABNEY POINT FUND 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 94-3209929	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE II	N/A
WALKER FAMILY FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 13-4290882	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
YOUTH OUTDOOR LEGACY FUND 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 01-0833226	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A
THE WHITEHORSE FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 94-3101726	GRANTMAKING TO NON-PROFITS IN THE GREATER PUGET SOUND AREA	WA	501(C)(3)	11A-TYPE I	N/A