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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

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1

Briefly describe the organization’s mission

THE MISSION OF THE YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY IS TO ADVANCE THE QUALITY OF LIFE FOR WOMEN OF ALL AGES, RACES AND FAITHS, AND THEIR FAMILIES IN SUPPORT OF THIS MISSION, THE YWCA PROVIDES SERVICES TO MEET CRITICAL NEEDS, PROMOTE SELF-SUFFICIENCY, REDUCE VIOLENCE, ELIMINATE RACISM AND ACHIEVE EQUAL OPPORTUNITIES FOR ALL PEOPLE OUR VISION WE BELIEVE THAT, WORKING TOGETHER, WE CAN CREATE A COMMUNITY WHERE ALL WOMEN AND FAMILIES HAVE A SAFE AND STABLE PLACE TO LIVE ALL ADULTS ARE ECONOMICALLY SELF-SUFFICIENT ALL CHILDREN AND YOUTH DEVELOP THE SKILLS THEY NEED FOR SUCCESSFUL LIVES ALL PEOPLE LIVE WITH DIGNITY - FREE FROM VIOLENCE, RACISM AND DISCRIMINATION

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 \$ 9,441,881 including grants of \$ 3,691,668) (Revenue \$ 195,788)

HOUSING - RELATED SERVICES 22,373 PERSONS WERE SERVED AND 10,659 RECEIVED ONGOING SERVICES, INCLUDING 2,635 CHILDREN SERVICES INCLUDE TWO DAY CENTERS FOR HOMELESS WOMEN, CASE MANAGEMENT, EVICTION PREVENTION, COUNSELING, AND INFORMATION/REFERRAL SERVICES ASSESSMENT, EDUCATION, AND ADVOCACY FOR CLIENTS NEEDING ACCESS TO HEALTH CARE WAS ALSO PROVIDED AN ADDITIONAL 6,146 PERSONS WERE SERVED THROUGH FISCAL AGENT SERVICES

4b

(Code) (Expenses \$ 8,468,411 including grants of \$ 202,073) (Revenue \$ 3,105,743)

HOUSING 2,897 PERSONS, INCLUDING 1,389 CHILDREN, RECEIVED HOUSING THROUGH YWCA OWNED OR OPERATED HOUSING FACILITIES SERVICES INCLUDE PERMANENT AND TIME-LIMITED HOUSING FOR LOW AND VERY LOW INCOME CLIENTS, 24 HOUR DESK AND SECURITY SERVICE, COUNSELING, AND INFORMATION/REFERRAL SERVICES YWCA OWNS 693 APARTMENT UNITS AND OPERATES OR PROVIDES SERVICES AT AN ADDITIONAL 267 UNITS

4c

(Code) (Expenses \$ 5,476,608 including grants of \$ 1,718,932) (Revenue \$ 187,415)

CHILDREN AND YOUTH 1,118 WERE SERVED DIRECTLY SERVICES INCLUDE DEVELOPMENTAL CHILD CARE FOR TODDLERS THROUGH SCHOOL AGE CHILDREN, MANY OF WHOM ARE BELOW MEDIAN INCOME AND RECEIVE SUBSIDIZED CHILD CARE, AFTER-SCHOOL AND SUMMER PROGRAMS AIMED AT SKILL-BUILDING AND MENTORING FOR AT RISK GIRLS IN MIDDLE AND HIGH SCHOOL, AND SPECIALIZED, AGE-APPROPRIATE COUNSELING FOR CHILDREN TO HELP THEM OVERCOME THE EFFECTS OF DOMESTIC VIOLENCE ANOTHER 7,093 PROVIDERS OF OUT-OF-SCHOOL CARE FOR CHILDREN AND YOUTH THROUGHOUT WASHINGTON STATE WERE GIVEN ON-SITE TRAINING AND TECHNICAL ASSISTANCE, WHICH WILL INDIRECTLY BENEFIT MANY MORE CHILDREN AND YOUTH

4d

Other program services (Describe in Schedule O) See also Additional Data for Description


















(Expenses \$ 6,240,763 including grants of \$ 869,275) (Revenue \$ 882,634)

4e

Total program service expenses \$ 29,627,663

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 (see instruction)? 	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 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	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 Yes	
11 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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
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. 	11b	No
c 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. 	11c	No
d 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. 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e Yes	
f 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. 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	No
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, XII, and XIII is optional 	12b 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, Parts I and IV	14b	No
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, Parts II and IV	15	No
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, Parts III and IV	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 (see instructions)	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 Yes	
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
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	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>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	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>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	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> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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

Check if Schedule O contains a response to any question in this Part V

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
	1a329		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
	2a970		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: See instructions for 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?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	Yes	
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?			
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
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?			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
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.	13b	
c	Enter the amount of reserves on hand.	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?			
14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			

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 to any question in this Part VI

Section A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a43		
b	Enter the number of voting members included in line 1a, above, who are independent	1b43		
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		No
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 governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant 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		No
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
	If "Yes" to line 15a or 15b, 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	Yes	
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	Yes	

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filedWA
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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. KRIS LAMBRIGHT 1118 FIFTH AVENUE SEATTLE, WA 98101 (206) 490-4380

Check if Schedule O contains a response to any question in this Part VII ☐

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.

- 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, 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, and 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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								206,616	0	31,832

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? <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	No
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

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
WALSH CONSTRUCTION CO 2905 SW FIRST AVE PORTLAND, OR 97201	CONSTRUCTION SERVICES	15,520,032
SYNERGY CONSTRUCTION CO 14040 NE 181ST ST WOODINVILLE, WA 98072	CONSTRUCTION SERVICES	1,985,340
STICKNEY MURPHY ROMINE 911 WESTERN AVE 900 SEATTLE, WA 98104	ARCHITECTS	968,247
JH BRAUNER & CO 18605 51ST AVE SE BOTHELL, WA 98012	FINANCIAL SERVICES	120,510
SEASIDE LANDSCAPE AND EXCAVATION INC PO BOX 1676 STANWOOD, WA 98292	CONSTRUCTION SERVICES	118,881
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 15		

Part VIII

Statement of Revenue

					(A)	(B)	(C)	(D)			
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514			
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	2,712,564	33,920,278						
	b	Membership dues	1b								
	c	Fundraising events	1c	1,757,663							
	d	Related organizations	1d								
	e	Government grants (contributions)	1e	21,757,979							
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,692,072							
	g	Noncash contributions included in lines 1a-1f \$		680,403							
	h	Total. Add lines 1a-1f									
	Program Service Revenue	2a	Business Code						3,105,743	3,105,743	
		HOUSING			531110						
b		COMMUNITY SERVICES			900099	828,478	828,478				
c		HOUSING-RELATED SVCS			624200	195,788	195,788				
d		CHILDREN AND YOUTH			624100	187,415	187,415				
e		OTHER PROGRAMS			900099	54,156	54,156				
f		All other program service revenue									
g		Total. Add lines 2a-2f			4,371,580						
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			812,633			812,633			
	4	Income from investment of tax-exempt bond proceeds . .									
	5	Royalties									
	6a	(i) Real			190,759			190,759			
		214,282									
		Less rental expenses							23,523		
		Rental income or (loss)							190,759		
	d	Net rental income or (loss)									
	7a	(i) Securities			333,728			333,728			
		3,968,077									
		Less cost or other basis and sales expenses							3,634,349		
		Gain or (loss)							333,728		
	d	Net gain or (loss)									
	8a	Gross income from fundraising events (not including \$ 1,757,663 of contributions reported on line 1c) See Part IV, line 18			222,597	-228,550		-228,550			
		a									
		Less direct expenses							451,147		
	c	Net income or (loss) from fundraising events . .									
	9a	Gross income from gaming activities See Part IV, line 19			2,395	885		885			
		b									
		Less direct expenses							1,510		
c	Net income or (loss) from gaming activities . .										
10a	Gross sales of inventory, less returns and allowances										
	a										
	Less cost of goods sold										
c	Net income or (loss) from sales of inventory . .										
Miscellaneous Revenue				Business Code							
11a											
b											
c											
d	All other revenue										
e	Total. Add lines 11a-11d										
12	Total revenue. See Instructions			39,401,313	4,371,580	0	1,109,455				

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	2,736,527	2,736,527		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	3,745,421	3,745,421		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	238,448		238,448	
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	12,933,243	11,392,324	747,892	793,027
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	745,797	640,664	56,443	48,690
9	Other employee benefits	1,352,134	1,196,457	72,282	83,395
10	Payroll taxes	1,453,528	1,267,098	106,218	80,212
a	Fees for services (non-employees) Management				
b	Legal	37,867	18,999	18,868	
c	Accounting	92,573		92,573	
d	Lobbying	4,000		4,000	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	836,424	657,430	20,636	158,358
12	Advertising and promotion	34,420	17,830	12,720	3,870
13	Office expenses	1,330,357	1,103,931	111,844	114,582
14	Information technology				
15	Royalties				
16	Occupancy	3,067,554	2,962,477	82,260	22,817
17	Travel	354,382	328,267	19,556	6,559
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	73,497	47,545	22,326	3,626
20	Interest	1,589,895	1,589,895		
21	Payments to affiliates	20,000		20,000	
22	Depreciation, depletion, and amortization	1,516,177	1,437,553	58,780	19,844
23	Insurance	316,942	254,879	51,951	10,112
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	LICENSES PERMITS & FEES	196,451	141,100	26,186	29,165
b	INKIND EQUIP & SOFTWARE	117,793	37,718	6,000	74,075
c	DUES	54,452	22,357	31,521	574
d	MISCELLANEOUS	44,678	29,191	14,441	1,046
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	32,892,560	29,627,663	1,814,945	1,449,952
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) 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			3,629,698	1	4,075,112
	2	Savings and temporary cash investments			16,353,953	2	7,907,786
	3	Pledges and grants receivable, net			3,875,133	3	6,056,297
	4	Accounts receivable, net			3,050,493	4	4,627,190
	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)), 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). Schedule L				6	
	7	Notes and loans receivable, net			8,688,824	7	9,304,829
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			636,303	9	640,777
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	89,549,393	62,696,815	10c	77,914,480
	b	Less: accumulated depreciation	10b	11,634,913			
	11	Investments—publicly traded securities			20,591,648	11	23,923,098
	12	Investments—other securities. See Part IV, line 11			2,830,992	12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,587,568	15	1,403,731
16	Total assets. Add lines 1 through 15 (must equal line 34)			123,941,427	16	135,853,300	
Liabilities	17	Accounts payable and accrued expenses			3,902,042	17	6,772,899
	18	Grants payable				18	
	19	Deferred revenue			52,564	19	31,104
	20	Tax-exempt bond liabilities			44,607,401	20	37,073,808
	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			15,200,722	23	24,857,313
	24	Unsecured notes and loans payable to unrelated third parties			100,000	24	
	25	Other liabilities. Complete Part X of Schedule D			17,820	25	228,571
	26	Total liabilities. Add lines 17 through 25			63,880,549	26	68,963,695
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			33,727,073	27	32,572,895
	28	Temporarily restricted net assets			21,003,305	28	27,878,121
	29	Permanently restricted net assets			5,330,500	29	6,438,589
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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			60,060,878	33	66,889,605
	34	Total liabilities and net assets/fund balances			123,941,427	34	135,853,300

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	39,401,313
2	Total expenses (must equal Part IX, column (A), line 25)	2	32,892,560
3	Revenue less expenses Subtract line 2 from line 1	3	6,508,753
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	60,060,878
5	Other changes in net assets or fund balances (explain in Schedule O)	5	319,974
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	66,889,605

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	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		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	Yes	
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	

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

2010

Open to Public Inspection

Name of the organization
YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Employer identification number
91-0482890

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 described in **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?

(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?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 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 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	20,084,096	26,641,453	23,847,029	32,992,147	33,920,278	137,485,003
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	20,084,096	26,641,453	23,847,029	32,992,147	33,920,278	137,485,003
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)						2,086,381
6 Public Support. Subtract line 5 from line 4						135,398,622

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	20,084,096	26,641,453	23,847,029	32,992,147	33,920,278	137,485,003
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,157,176	1,394,225	1,261,710	866,718	1,026,915	5,706,744
9 Net income from unrelated business activities, whether or not the business is regularly carried on	13,265		13,556	10,200		37,021
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						143,228,768
12 Gross receipts from related activities, etc (See instructions)					12	18,289,451
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 2010 (line 6 column (f) divided by line 11 column (f))	14	94 530 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	93 660 %
16a 33 1/3% support test—2010. 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—2009. 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—2010. 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—2009. 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 Section 509(a)(2)
(Complete only if you checked the box on line 9 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. 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—2009. 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Additional Data

Software ID:

Software Version:

EIN: 91-0482890

Name: YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

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	(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			
MOLLY HANLON BOARD CHAIR	1 00	X		X				0	0	0
LESLIE D JONES BOARD CHAIR ELECT	1 00	X		X				0	0	0
CHRISTAL JENKINS SECRETARY	1 00	X		X				0	0	0
MARY E SNAPP TREASURER	1 00	X		X				0	0	0
CHARLENE BLETHEN BOARD MEMBER	1 00	X						0	0	0
MARTHA MAYES BOES BOARD MEMBER	1 00	X						0	0	0
BOBBE BRIDGE BOARD MEMBER	1 00	X						0	0	0
SONYA CAMPION BOARD MEMBER	1 00	X						0	0	0
BLAIR CARLETON BOARD MEMBER	1 00	X						0	0	0
CHERYL CHOW BOARD MEMBER	1 00	X						0	0	0
ROBYN CORR BOARD MEMBER	1 00	X						0	0	0
MARYANN CRISSEY BOARD MEMBER	1 00	X						0	0	0
PAM DANIELS BOARD MEMBER	1 00	X						0	0	0
ELLEN CONEDERA DIAL BOARD MEMBER	1 00	X						0	0	0
IRME DORE BOARD MEMBER	1 00	X						0	0	0
BOB DREWEL BOARD MEMBER	1 00	X						0	0	0
JEAN ENERSEN BOARD MEMBER	1 00	X						0	0	0
MARY ANNE ENG BOARD MEMBER	1 00	X						0	0	0
BARBARA FAHEY BOARD MEMBER	1 00	X						0	0	0
MARTHA FULLER BOARD MEMBER	1 00	X						0	0	0
MIMI GARDNER GATES BOARD MEMBER	1 00	X						0	0	0
PAMELA HARKINS BOARD MEMBER	1 00	X						0	0	0
DEBORAH HARRIS BOARD MEMBER	1 00	X						0	0	0
KANDACE HOLLEY BOARD MEMBER	1 00	X						0	0	0
KALEN HOLMES BOARD MEMBER	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	(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			
KATIE HONG BOARD MEMBER	1 00	X						0	0	0
LAURA JENNINGS BOARD MEMBER	1 00	X						0	0	0
JONELLE MC JOHNSON BOARD MEMBER	1 00	X						0	0	0
SUSAN KERNES BOARD MEMBER	1 00	X						0	0	0
AMY KOSTERLITZ BOARD MEMBER	1 00	X						0	0	0
KAYCEE KRYSTY BOARD MEMBER	1 00	X						0	0	0
SANDRA MADRID BOARD MEMBER	1 00	X						0	0	0
SUSAN MASK BOARD MEMBER	1 00	X						0	0	0
ELIZABETH N MCCA W BOARD MEMBER	1 00	X						0	0	0
CHARLES MITCHELL BOARD MEMBER	1 00	X						0	0	0
BARBARA S MORGAN BOARD MEMBER	1 00	X						0	0	0
BETSY MOSELEY BOARD MEMBER	1 00	X						0	0	0
JEANNIE NORDSTROM BOARD MEMBER	1 00	X						0	0	0
NINA ODELL BOARD MEMBER	1 00	X						0	0	0
SHARON ROWLEY BOARD MEMBER	1 00	X						0	0	0
JILL RUCKLESHAUS BOARD MEMBER	1 00	X						0	0	0
DARA SCHMIDT BOARD MEMBER	1 00	X						0	0	0
JAN SINEGAL BOARD MEMBER	1 00	X						0	0	0
PHYLLIS STARK BOARD MEMBER	1 00	X						0	0	0
KATHY SURACE-SMITH BOARD MEMBER	1 00	X						0	0	0
WHITNEY TYNER BOARD MEMBER	1 00	X						0	0	0
WENDE WAHL BOARD MEMBER	1 00	X						0	0	0
SUE SHERBROOKE CEO	40 00			X				116,072	0	17,188
KRIS LAMBRIGHT CFO	40 00			X				90,544	0	14,644

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

4d. Other program services				
(Code)	(Expenses \$ 4,838,362	including grants of \$ 709,111	(Revenue \$ 50,306)	
EMPLOYMENT ASSISTANCE FOR THE DISADVANTAGED 23,210 PERSONS WERE SERVED AND 8,646 RECEIVED ONGOING SERVICES SERVICES INCLUDED INDIVIDUAL AND GROUP JOB SEARCH COUNSELING, PLACEMENT ASSISTANCE, FOLLOW-UP SUPPORT, CASE MANAGEMENT, TUITION ASSISTANCE, AND ASSISTANCE WITH FOOD, CLOTHING, HOUSING AND ACCESS TO HEALTH CARE SERVES BOTH ADULTS AND YOUTH				
(Code)	(Expenses \$ 739,076	including grants of \$ 133,927	(Revenue \$ 3,850)	
DOMESTIC VIOLENCE 4,099 WOMEN, TEENS AND CHILDREN WERE SERVED AND 2,313 RECEIVED ON-GOING SERVICES SERVICES INCLUDE COUNSELING FOR ADULTS RECOVERING FROM DOMESTIC VIOLENCE, VIOLENCE PREVENTION PROGRAMMING FOR TEENS, AND EDUCATIONAL OUTREACH IN THE COMMUNITY REGARDING DOMESTIC VIOLENCE				
(Code)	(Expenses \$ 663,325	including grants of \$ 26,237	(Revenue \$ 828,478)	
COMMUNITY SERVICES VOLUNTEER SERVICES, INCLUDING ADOPT-A-FAMILY AND SCHOOL DAYS PROGRAMS, AND SOCIAL JUSTICE WORK BOTH INTERNAL AND EXTERNAL TO THE AGENCY 3,582 LOW-INCOME CHILDREN & ADULTS RECEIVED BACK TO SCHOOL SUPPLIES AND/OR HOLIDAY GIFTS VOLUNTEERS CONTRIBUTED OVER 15,000 HOURS TO YWCA AND ITS PROGRAMS				

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to 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,” to 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,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Employer identification number 91-0482890
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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	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 funtion 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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-

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

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												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><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></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														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j 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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f 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)).

		(a)		(b)
		Yes	No	Amount
1	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			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		97,379
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			97,379
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	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
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	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?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Employer identification number

91-0482890

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate 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?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to 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 pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–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
2a	
2b	
2c	
2d	

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, 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" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

1b

If the organization elected, as permitted under SFAS 116, 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)

Revenues included in 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 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

Using the organization's 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 XIV

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" to 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 XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	15,515,275	17,257,480	22,619,785		
b Contributions	1,108,089	127,417	96,149		
c Investment earnings or losses	2,047,751	3,416,307	-4,791,454		
d Grants or scholarships					
e Other expenditures for facilities and programs	671,000	5,285,929	667,000		
f Administrative expenses					
g End of year balance	18,000,115	15,515,275	17,257,480		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 64 000 %

b

Permanent endowment ▶ 36 000 %

c

Term endowment ▶ 0 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No

b

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

3b

4

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

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		17,766,367		17,766,367
b Buildings		49,289,846	8,694,939	40,594,907
c Leasehold improvements				
d Equipment		3,409,163	2,939,974	469,189
e Other		19,084,017		19,084,017
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				77,914,480

Schedule D (Form 990) 2010

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	139,401,313
2	Total expenses (Form 990, Part IX, column (A), line 25)	232,892,560
3	Excess or (deficit) for the year Subtract line 2 from line 1	36,508,753
4	Net unrealized gains (losses) on investments	41,756,680
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	8-795,424
9	Total adjustments (net) Add lines 4 - 8	9961,256
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	107,470,009

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	143,165,306
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments	2a1,756,680
b	Donated services and use of facilities	2b285,884
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV)	2d1,284,124
e	Add lines 2a through 2d	2e3,326,688
3	Subtract line 2e from line 1	339,838,618
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV)	4b-437,305
c	Add lines 4a and 4b	4c-437,305
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	539,401,313

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	135,695,297
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities	2a453,845
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV)	2d2,348,892
e	Add lines 2a through 2d	2e2,802,737
3	Subtract line 2e from line 1	332,892,560
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV)	4b
c	Add lines 4a and 4b	4c0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	532,892,560

Part XIVSupplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	YWCA ENDOWMENT FUNDS EXIST TO PROVIDE RELIABLE ONGOING SUPPORT FOR THE WORK OF THE YWCA. TO THIS END, THE YWCA INVESTS IN HIGH QUALITY MUTUAL AND EXCHANGE-TRADED FUNDS. THE YWCA HAS ADOPTED AN INVESTMENT POLICY THAT IS INTENDED TO PROVIDE THE YWCA'S INVESTMENT COMMITTEE WITH OBJECTIVES AND GUIDELINES FOR THE MANAGEMENT OF PRINCIPAL AND ACCUMULATED EARNINGS IN ALL YWCA ENDOWMENT FUNDS. THE INVESTMENT OBJECTIVES ARE TO GENERATE A RELIABLE PAYOUT TO SUPPORT PROGRAMS, GROW PRINCIPAL TO HELP OFFSET INFLATION, AND TAKE THE MINIMUM AMOUNT OF RISK TO PRINCIPAL NECESSARY TO MEET THE STATED PERFORMANCE OBJECTIVE. THE INVESTMENT COMMITTEE MEETS QUARTERLY TO MONITOR COMPLIANCE WITH THE INVESTMENT POLICY AND TO REVIEW PERFORMANCE. PERFORMANCE OBJECTIVE: OVER A MARKET CYCLE, IN ORDER TO ENSURE THE CONTINUED PURCHASING POWER OF THE FUND, THE FUND WILL BE EXPECTED TO RETURN AT LEAST THE NOMINAL PAYOUT PERCENTAGE (DEFINED AS THE ACTUAL PAYOUT AMOUNT AS A PERCENTAGE OF THE CURRENT MARKET VALUE OF THE FUND) ON THE CURRENT MARKET VALUE PLUS THE RATE OF INFLATION PER ANNUM.
PART XI, LINE 8 - OTHER ADJUSTMENTS		IN-KIND REVENUE ADJUSTMENT FROM YWCA -167,961 CHANGE IN NET ASSETS FROM RELATED ENTITIES -307,506 ROUNDING -68 NONCONTROLLING INTEREST IN LOSSES OF SUBSIDIARIES -319,889
PART XII, LINE 2D - OTHER ADJUSTMENTS		REVENUE FROM AFFILIATES INCLUDED ON THE CONSOLIDATED FINANCIAL STATEMENTS 1,284,124
PART XII, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE -413,782 RENTAL EXPENSE -23,523
PART XIII, LINE 2D - OTHER ADJUSTMENTS		EXPENSES FROM AFFILIATES INCLUDED ON THE CONSOLIDATED FINANCIAL STATEMENTS 1,911,551 SPECIAL EVENTS EXPENSE 413,782 RENTAL EXPENSE 23,523 ROUNDING 36

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Employer identification number
91-0482890

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes

☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		EASTSIDE LUNCHEON (event type)	SEATTLE LUNCHEON (event type)	4 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	571,619	1,023,268	385,373
	2	Less Charitable contributions	530,039	941,668	285,956
	3	Gross income (line 1 minus line 2)	41,580	81,600	99,417
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs	7,255	13,923	12,140
	7	Food and beverages	42,281	85,181	22,866
	8	Entertainment	27,820	20,909	16,964
	9	Other direct expenses	46,712	68,293	86,803
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			

Part III Gaming. Complete if the organization answered "Yes" to 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
Revenue					(Add col (a) through col (c))
1	Gross revenue				
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	Yes % No	Yes % No	Yes % No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate 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 _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

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?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide 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

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 Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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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

2010

Open to Public
Inspection

Name of the organization
YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Employer identification number
91-0482890

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. Part II can be duplicated if additional space is needed. ▶ ☐

1 (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

42

3

Enter total number of other organizations

2

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
See Additional Data Table					

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 EACH PROGRAM THAT ISSUES GRANTS FUNDS HAS A SYSTEM IN PLACE TO MONITOR THEM THE PROCEDURES DIFFER DEPENDING ON THE TYPE OF GRANT AND ITS FUNDING SOURCE COMMON ELEMENTS INCLUDE REQUIRING AN INVOICE AND/OR OTHER BACK-UP FOR EACH GRANT DISTRIBUTION, PLUS THE SUBMISSION OF REQUIRED REPORTS

Software ID:

Software Version:

EIN: 91-0482890

Name: YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

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
ABUSED DEATH WOMEN'S ADVOCACY SERVICES 8623 ROOSEVELT WAY NE SEATTLE, WA 98115	91-1339173	501(C)(3)	6,455				STOP GRANT
ASIAN & PACIFIC ISLANDER WOMEN & FAMILY SAFETY CENTER PO BOX 14047 SEATTLE, WA 98114	91-1674016	501(C)(3)	7,801				STOP GRANT
AUBURN YOUTH RESOURCES816 F ST SE AUBURN, WA 98002	91-0903084	501(C)(3)	8,541				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION
BOYS & GIRLS CLUBS OF WHATCOM COUNTY1715 KENTUCKY STREET BELLINGHAM, WA 98229	91-0836427	501(C)(3)	5,172				FEED YOUR BRAIN GRANT
CATHOLIC COMMUNITY SERVICES100 23RD AVE S SEATTLE, WA 98144	91-1585652	501(C)(3)	71,693				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION
CHILDREN'S ALLIANCE718 6TH AVE SOUTH SEATTLE, WA 98104	91-0982879	501(C)(3)	11,678				WASHINGTON AFTERSCHOOL NETWORK
CHILDREN'S HOME SOCIETY OF WASHINGTON 3300 NE 65TH STREET SEATTLE, WA 98115	91-0575955	501(C)(3)	5,750				RURAL CAPACITY BUILDING GRANT, SUMMER FOOD STIPEND
CONSEJO COUNSELING AND REFERRAL SERVICE 3808 SOUTH ANGELINE STREET SEATTLE, WA 98118	91-1021247	501(C)(3)	6,265				STOP GRANT
DOMESTIC ABUSE WOMENS NETWORKPO BOX 88007 TUKWILA, WA 98138	91-1176122	501(C)(3)	99,009				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION
EL CENTRO DE LA RAZA-COUNTY2524 16TH AVE S SEATTLE, WA 98144	91-0899927	501(C)(3)	27,068				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION, QUALITY ENHANCEMENT GRANT
EVERETT PUBLIC SCHOOLSPO BOX 2098 EVERETT, WA 98213	91-6001542	SCHOOL DISTRICT	13,093				REFUGEE SCHOOL IMPACT GRANT
FEDERAL WAY SCHOOL DISTRICT1714 334TH LANE S D102 FEDERAL WAY, WA 98003	91-6001624	SCHOOL DISTRICT	50,064				REFUGEE SCHOOL IMPACT GRANT

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
HIGHLINE PUBLIC SCHOOLS15675 AMBAUM BLVD SW BURIEN,WA 98166	91-6001631	SCHOOL DISTRICT	61,000				REFUGEE SCHOOL IMPACT GRANT
HOPELINKPO BOX 3577 REDMOND,WA 98052	91-0982116	501(C)(3)	170,181				COMMUNITY JOBS GRANT
HOSPITALITY HOUSE 15003 14TH AVE SW BURIEN,WA 98166	91-2006859	501(C)(3)	14,178				EMERGENCY FOOD AND SHELTER PROGRAM
JEWISH FAMILY SERVICES 1601 16TH AVE SEATTLE,WA 98122	91-0565537	501(C)(3)	8,610				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION
KENT SCHOOL DISTRICT 12033 SE 256 STREET KENT,WA 98030	91-6001646	SCHOOL DISTRICT	134,000				REFUGEE SCHOOL IMPACT GRANT
LOON LAKE ELEMENTARY SCHOOL4001 MAPLE STREET LOON LAKE,WA 98148	91-1352367	SCHOOL DISTRICT	5,069				FEED YOUR BRAIN GRANT
MAPLE VALLEY FOOD BANKPO BOX 332 MAPLE VALLEY,WA 98038	91-6057006	501(C)(3)	15,354				EMERGENCY SHELTER AND HOMELESSNESS PREVENTION
MARYSVILLE SCHOOL DISTRICT4220 80TH ST NE MARYSVILLE,WA 98270	91-6014415	SCHOOL DISTRICT	14,425				REFUGEE SCHOOL IMPACT GRANT
MULTI SERVICE CENTER 1200 S 336TH STREET FEDERAL WAY,WA 98093	23-7120815	GOVERNMENT AGENCY	134,739				AGENCY GRANT TO THREE AGENCIES
OPERATION NIGHTWATCH PO BOX 21181 SEATTLE,WA 98111	91-0964027	501(C)(3)	26,422				EMERGENCY FOOD AND SHELTER PROGRAM
PUGET SOUND EDUCATIONAL SERVICE DISTRICT400 SW 152ND ST BURIEN,WA 98166	91-0851413	GOVERNMENT AGENCY	80,611				COMMUNITY JOBS GRANT
QUILLAYUTE VALLEY SCHOOL DISTRICTPO BOX 60 FORKS,WA 98331	91-1012362	SCHOOL DISTRICT	5,158				FEED YOUR BRAIN GRANT

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
REFUGEE WOMEN'S ALLIANCE4008 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98108	91-1296964	501(C)(3)	6,455				STOP GRANT
RENTON SCHOOL DISTRICT300 SW 7TH STREET RENTON, WA 98057	91-6001635	SCHOOL DISTRICT	66,387				REFUGEE SCHOOL IMPACT GRANT
ROCHESTER ORGANIZATION OF FAMILIES10140 HWY 12 SW ROCHESTER, WA 98579	77-0620956	501(C)(3)	5,720				FEED YOUR BRAIN GRANT, RURAL CAPACITY BUILDING GRANT, SUMMER FOOD STIPEND
SEATTLE PUBLIC SCHOOLS PO BOX 34165 SEATTLE, WA 98124	91-6001541	SCHOOL DISTRICT	412,850				REFUGEE SCHOOL IMPACT GRANT
SHALOM ZONE1415 NE 43RD ST SEATTLE, WA 98105	91-2110379	501(C)(3)	16,086				EMERGENCY FOOD AND SHELTER PROGRAM
SEATTLE HOUSING AND RESOURCE EFFORTPO BOX 2548 SEATTLE, WA 98111	91-1577965	501(C)(3)	43,990				EMERGENCY FOOD AND SHELTER PROGRAM
SHORELINE SCHOOL DISTRICT18560 1ST AVE NE SHORELINE, WA 98155	91-6001644	SCHOOL DISTRICT	35,000				REFUGEE SCHOOL IMPACT GRANT
SOCIETY OF ST VINCENT DE PAUL5950 4TH AVE S SEATTLE, WA 98108	91-0583891	501(C)(3)	16,225				EMERGENCY FOOD AND SHELTER PROGRAM
SPOKANE PUBLIC SCHOOLS200 N BERNARD SPOKANE, WA 99201	91-6001582	SCHOOL DISTRICT	164,180				REFUGEE SCHOOL IMPACT GRANT
TACOMA SCHOOL DISTRICTPO BOX 1357 TACOMA, WA 98401	91-6001553	SCHOOL DISTRICT	55,000				REFUGEE SCHOOL IMPACT GRANT
TRAC ASSOCIATES1001 BROADWAY SUITE 217 SEATTLE, WA 98122	91-1247183		223,838				COMMUNITY JOBS GRANT
TUKWILA SCHOOL DISTRICT4640 S 144TH ST TUKWILA, WA 98168	91-6001638	SCHOOL DISTRICT	138,371				REFUGEE SCHOOL IMPACT GRANT

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
UNITED INDIANS OF ALL TRIBESPO BOX 99100 SEATTLE,WA 98199	91-0889016	501(C)(3)	15,576				STOP GRANT, EMERGENCY FOOD AND SHELTER PROGRAM
VANCOUVER SCHOOL DISTRICTPO BOX 8937 VANCOUVER,WA 98668	91-6001540	SCHOOL DISTRICT	30,405				REFUGEE SCHOOL IMPACT GRANT
VOLUNTEERS OF AMERICA PO BOX 839 EVERETT,WA 98206	91-0577129	501(C)(3)	66,338				WASHINGTON REGIONAL AFTERSCHOOL PROJECT, STAKEHOLDERS MEETING STIPEND
WORLD LANGUAGE SERVICESPO BOX 1716 MILTON,WA 98354	91-2154975		15,524				STOP GRANT
WASHINGTON STATE UNIVERSITYPO BOX 641025 PULLMAN,WA 99164	91-6001108	UNIVERSITY	206,313				FEED YOUR BRAIN, WA REGIONAL AFTERSCHOOL PROJECT, STAKEHOLDERS MEETING STIPEND
YAKIMA CHRISTIAN MISSIONPO BOX 547 WHITE SWAN,WA 98952	91-2112215	501(C)(3)	5,946				FEED YOUR BRAIN GRANT, RURAL CAPACITY BUILDING GRANT, SUMMER FOOD STIPEND
YOUTH AND FAMILY LINK CO TOUTLE RIVER RANCH INCPO BOX 2052 LONGVIEW,WA 98632	91-0726260	501(C)(3)	5,891				FEED YOUR BRAIN GRANT, RURAL CAPACITY BUILDING GRANT, SUMMER FOOD STIPEND
YOUTHCARE2500 NE 54TH ST STE 100 SEATTLE,WA 98105	91-0917079	501(C)(3)	18,553				WORKING ZONE GRANT, EMERGENCY FOOD AND SHELTER PROGRAM

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
UTILITY ASSISTANCE	596		83,284	FMV	UTILITY BILLS
SHELTER/RENT ASSISTANCE	5435		3,353,492	FMV	HOUSING
TRANSPORTATION ASSISTANCE	1599		139,523	FMV	BUS PASSES, TICKETS, ETC
CHILDCARE ASSISTANCE	21		2,883	FMV	CHILDCARE
FOOD ASSISTANCE	147		15,271	FMV	GROCERIES, ETC
CASH ASSISTANCE (INCENTIVES, AWARDS, CREDIT REPAIR)	34	11,773			
TRAINING - TUITION ASSISTANCE	168		45,444	FMV	TRAINING, EDUCATION, ETC
CLOTHING ASSISTANCE	207		19,619	FMV	CLOTHING
MEDICAL ASSISTANCE	41		11,027	FMV	MEDICAL BILLS, ETC
LICENSE & PERMIT ASSISTANCE	112		4,458	FMV	LICENSE RENEWALS, ETC
SUPPLIES ASSISTANCE (HOUSEHOLD, JOB, SCHOOL)	1486		46,034	FMV	SUPPLIES
FURNITURE ASSISTANCE	44		12,613	FMV	FURNITURE

Schedule K (Form 990)	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.</div>	OMB No 1545-0047
		2010
		Open to Public Inspection

Name of the organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Employer identification number 91-0482890
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Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A HOUSING AUTHORITY OF THE COUNTY OF KING	91-6000978	494760JP3	09-01-2005	3,655,000	SUMMERFIELD APARTMENTS PROJECT		X		X		X
B EVERETT HOUSING AUTHORITY- SERIES 2007	91-6000965	30002EAM6	06-27-2007	13,760,000	AFFORDABLE HOUSING-APT PROJECT		X		X		X
C HOUSING AUTHORITY OF THE COUNTY OF KING- 2007A	91-6000978	494759MY6	06-27-2007	15,040,000	AFFORDABLE HOUSING-APT PROJECT		X		X		X
D HOUSING AUTHORITY OF THE COUNTY OF KING	91-6000978	494759NK5	12-23-2009	5,700,000	ISSAQUAH FAMILY VILLAGE PROJECT-PHASE I		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	3,655,000		13,760,000		15,040,000		5,700,000	
4	Gross proceeds in reserve funds	1,169,149		1,169,149		11,731			
5	Capitalized interest from proceeds	7,539						7,539	
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	257,147		257,147		318,853		24,250	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	3,655,000		12,991,340		14,217,332		3,564,613	
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2005		2007		2007		2011	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X			X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Part IIIPrivate Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		X
b	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %		0 %		0 %	
6	Total of lines 4 and 5	0 %		0 %		0 %		0 %	
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IVArbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
2	Is the bond issue a variable rate issue?	X			X		X		X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	NA		NA		NA			
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X		X		X
b	Name of provider	NA		NA		NA		NA	
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6	Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part VSupplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Employer identification number

91-0482890

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 oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		21,000	FAIR MARKET VALUE
6 Cars and other vehicles .	X	1	222	FAIR MARKET VALUE
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded	X	16	586,444	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 ► (EVENT ITEMS)	X	5	20,862	COST
26 Other ► (AUCTION ITEMS)	X	144	51,875	AUCTION BOOK
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 1-28 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?

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

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

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

Yes

No

30a

No

31

Yes

32a

Yes

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	YWCA REPORTED INFORMATION BASED ON THE NUMBER OF CONTRIBUTIONS RECEIVED IN COLUMN (B) ABOVE
THIRD PARTY USE	PART I, LINE 32B	THE ORGANIZATION USES A THIRD PARTY TO SELL DONATIONS OF VEHICLES

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

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Name of the organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Employer identification number 91-0482890
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Identifier	Return Reference	Explanation
	FORM 990, PART I, LINE 6	1,373 VOLUNTEERS ASSIST IN HELPING BOTH PROGRAM STAFF AND ADMINISTRATION OF THESE, 47 VOLUNTEERS REPRESENT THE BOARD MEMBERS OF THE ORGANIZATION

Identifier	Return Reference	Explanation
	FORM 990, PART V, LINE 2A	THE YWCA FILED 970 W-2S FOR 2010. A LARGE NUMBER OF THESE WERE FOR INTERNS THAT ARE PAID THROUGH THE YWCA PAYROLL SYSTEM BUT ARE PART OF A STATE EMPLOYMENT CONTRACT. THE INTERNS WORK MAINLY AT NON-YWCA LOCATIONS. THE TOTAL BUDGETED YWCA STAFF FOR 2010 WAS APPROXIMATELY 296 FULL TIME EMPLOYEES.

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		ALL INDIVIDUALS WHO ARE DONORS TO THE ASSOCIATION, REGARDLESS OF THE SIZE OF THEIR GIFTS, ARE CONSIDERED TO BE MEMBERS OF THE ASSOCIATION FOR THE 12-MONTH PERIOD FOLLOWING THE DATE OF THEIR GIFT INDIVIDUALS BECOME MEMBERS IN ORDER TO FURTHER YWCA'S MISSION, SUPPORT YWCA PROGRAMS AND FOSTER LEADERSHIP

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		MEMBERS HAVE THE RIGHT TO VOTE ON ITEMS THE BOARD DEEMS NECESSARY

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE AUDIT COMMITTEE OF THE BOARD REVIEWS AND APPROVES THE FORM 990 EACH YEAR BEFORE IT IS FILED A COPY OF THE FORM 990 IS ALSO PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS COMPLETE AND SIGN A CONFLICT OF INTEREST POLICY ANNUALLY THE POLICY REQUIRES THEM TO ABIDE BY THE POLICY AND TO NOTIFY THE YWCA CHIEF EXECUTIVE OFFICER PROMPTLY IF THEY DISCOVER A REAL OR POTENTIAL CONFLICT IF A CONFLICT DOES ARISE, THE POLICY SPECIFIES THAT THE BOARD MEMBER WILL RECUSE THEMSELVES FROM THE DISCUSSION AND VOTE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THERE IS A FORMAL ANNUAL REVIEW PROCESS FOR THE AGENCY'S CHIEF EXECUTIVE OFFICER. A SUBCOMMITTEE OF THE BOARD PERFORMS THE REVIEW. THIS PROCESS WAS LAST COMPLETED IN FEBRUARY 2011. THE COMMITTEE RECOMMENDS THE COMPENSATION OF THE CEO TO THE BOARD. COMPENSATION IS COMPARED TO THE AGENCY COMPENSATION PLAN. THE PAY RANGES IN THE COMPENSATION PLAN ARE BASED ON A REVIEW OF SEVERAL COMPENSATION STUDIES. THE SALARY COMPARISONS ARE MADE TO SIMILAR-SIZED (BUDGET, NUMBER OF STAFF) ORGANIZATIONS IN THE NON-PROFIT HUMAN SERVICES FIELD IN THE STATE OF WASHINGTON. THERE IS ALSO A FORMAL ANNUAL REVIEW DONE BY THE CEO ON ALL OTHER OFFICERS AND KEY EMPLOYEES. THIS PROCESS WAS LAST PERFORMED IN OCTOBER 2010. COMPENSATION IS COMPARED TO THE AGENCY COMPENSATION PLAN. THE PAY RANGES IN THE COMPENSATION PLAN ARE BASED ON A REVIEW OF SEVERAL COMPENSATION STUDIES. THE SALARY COMPARISONS ARE MADE TO SIMILAR-SIZED (BUDGET, NUMBER OF STAFF) ORGANIZATIONS IN THE NON-PROFIT HUMAN SERVICES FIELD IN THE STATE OF WASHINGTON.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST FORM 990 IS AVAILABLE ON THE WEBSITE AND FORM 1023 IS AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART IX, LINE 11F	YWCA DOES NOT INCUR ANY FEES FOR INVESTMENT MANAGEMENT AS THEY HOLD AND MANAGE THEIR OWN ENDOWMENT FUNDS IN INVESTMENT ACCOUNTS

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,756,680 IN-KIND REVENUE ADJUSTMENT - 167,961 RECLASSIFICATION OF NET ASSETS FROM FAMILY VILLAGE LP -1,268,709 ROUNDING -36 TOTAL TO FORM 990, PART XI, LINE 5 319,974

SCHEDULE R
(Form 990)

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

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Employer identification number 91-0482890
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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
See Additional Data Table					

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	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1344937	TO HOLD AFFORDABLE HOUSING	WA	501(C)(3)	7 - 509(A)(1)	YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Yes	
(2) DRESS FOR SUCCESS SEATTLE 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1925352	SOCIAL SERVICES/EMPLOYMENT SERVICES	WA	501(C)(3)	9 - 509(A)(2)	YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Yes	

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) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ANGELINE'S LLC 1118 FIFTH AVENUE SEATTLE, WA98101 91-2123444	AFFORDABLE HOUSING	WA	N/A	RELATED	86,264	3,866,528		No		Yes		0 010 %
(2) YWCA FAMILY VILLAGE AT ISSAQUAH II LLC 1118 FIFTH AVENUE SEATTLE, WA98101 91-0482890	AFFORDABLE HOUSING	WA	N/A	RELATED		1,197		No		Yes		0 010 %

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, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization 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

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a Yes

1b No

1c No

1d Yes

1e Yes

1f No

1g No

1h No

1i No

1j Yes

1k Yes

1l No

1m Yes

1n Yes

1o No

1p No

1q No

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	(d) Method of determining amount involved
(1) ANGELINE'S LLC	A	71,108	ACTUAL AMOUNT ACCRUED
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2010

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.

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Software ID:

Software Version:

EIN: 91-0482890

Name: YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(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
SUMMERFIELD HOUSING LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	521,782	5,108,129	N/A
YW HOME NOW LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	0	5,571,262	N/A
YW AHF MOUNTLAKE TERRACE LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	551,072	5,954,196	N/A
YW AHF LYNNWOOD LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	792,258	10,512,664	N/A
YW AHF EVERETT LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	778,633	9,324,704	N/A
YWCA GREENBRIDGE LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	TO HOLD THE YWCA LEARNING CENTER	WA	174,905	5,287,435	N/A
YWCA FAMILY VILLAGE AT ISSAQUAH I LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	0	15,340,124	N/A
YWCA FAMILY VILLAGE AT REDMOND LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1579120	AFFORDABLE HOUSING	WA	246,975	2,609,359	N/A