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DLN: 93493319053242

# Form 990

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

2011

OMB No 1545-0047

Open to Public Inspection

identification number  1995 In number  2-2294 Intro \$ 6,499,888   Iturn for
No
No
turn for Yes No  luded? Yes No  ist (see instructions) number I  M State of legal domicile WA  TLE FOUNDATION  t assets  3
TLE FOUNDATION  t assets  d 4  Current Year  3 345,856
TLE FOUNDATION  t assets  d 4  f 9  f 9  f 10  f
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204.640
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3,086,945 2 -2,185,713
3,086,945 2 -2,185,713 End of Year
3,086,945 2 -2,185,713 End of Year 4 15,904,666
3

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . .

✓ Yes 

✓ No

	990 (2011)				Page 2
Par			ice Accomplishments conse to any question in this P	art III	
1	Briefly describe th	ie organization's mission			
TYPE	I SUPPORTING O	RGANIZATION UNDER	IRC SECTION 509(A)(3) TC	THE SEATTLE FOUNDATION	
2				ne year which were not listed on	
	•	or 990-EZ? :hese new services on S			┌ Yes ┌ No
3	Did the organization services?	n cease conducting, or i	nake significant changes in ho	wit conducts, any program	┌ Yes ┌ No
	If "Yes," describe t	hese changes on Sched	ule O		
4	expenses Section	501(c)(3) and 501(c)(4	) organizations and section 49	f its three largest program servic 947(a)(1) trusts are required to r for each program service reporte	eport the amount of
4a	FOUNDATION MAKES		F THE RESIDENTS OF THE GREATER	of \$ 2,246,495 ) (Revenue \$ G ORGANIZATION TO THE SEATTLE FOU PUGET SOUND AREA SEATTLE INTERNAT	NDATION THE SEATTLE
4b	(Code	) (Expenses \$	ıncluding grants o	f \$ ) (Revenue \$	)
4c	(Code	) (Expenses \$	ıncludıng grants o	f\$ ) (Revenue \$	)
4d	Other program se	rvices (Describe in Sch	edule O )		
	(Expenses \$	incl	uding grants of \$	) (Revenue \$	)
4e	Total program sei	vice expenses►\$	2,821,566		

Part TV	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 instructions)? 📆	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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a		No
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	Yes	
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		No
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
	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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III 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	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? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
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? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line $2$	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	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
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	· · · · · · · ·			
_	<b>1a</b>   0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c		
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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 or securities	40		
	account)?	4a		Νo
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			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
_	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	<b>.</b> .		NI -
	file Form 8282?	7c		Νo
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	, 9		
•	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
_	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
D D	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year [12b]			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	12=		
_	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
_	13c			
<del>l</del> a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14b		

**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.

Se	ection A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax								
14	year								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No					
4	Did the organization make any significant changes to its 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	Did the organization have members or stockholders?	6	Yes						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а									
b	Each committee with authority to act on behalf of the governing body?								
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								
	ection B. Policies (This Section B requests information about policies not required by the Internal	'		•					
Re	evenue Code.)								
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		No					
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete 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 the Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give								
	rise to conflicts?	12b	Yes						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did 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?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b		No					
	If "Yes," to line 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		No					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its								
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Se	ection C. Disclosure								
17									
40	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 990, and 990, T (501/c)								

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 made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public 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 FEREEN HOLMQUIST 1200 FIFTH AVENUE 1300

SEATTLE, WA 98101 (206)622-2294

# <u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

• 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

(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) WILLIAM CLAPP PRESIDENT	1 00	Х		х				0	0	0
(2) PAULA CLAPP VICE PRESIDENT	1 00	Х		Х				0	0	0
(3) NORMAN B RICE SECRETARY/TREASURER	1 00	Х		Х				0	231,081	17,681
(4) THOMAS WALDRON TRUSTEE	1 00	Х						0	0	0
(5) PHYLLIS CAMPBELL TRUSTEE	1 00	х						0	0	0
(6) ROBERT WRIGHT TRUSTEE	1 00	х						0	0	0
(7) MAURICIO VIVERO EXECUTIVE DIRECTOR	40 00			Х				164,196	0	20,021

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

	(A) Name and Title	(B) Average hours per week (describe	unless person is both an officer and a director/trustee) 2						(D) Reportable compensatio from the organization ( 2/1099-MIS	able Reportable sation compensatio the from related on (W- organizations		amo	mpens from t inizati	ted fother ation he on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)	org	relate ganıza	
16	Sub-Total							▶I						
1b c	Total from continuation sheets	to Part VII, Sec	tion A	<del></del>	<u>.</u>	÷		<u>-</u>						
d	Total (add lines 1b and 1c) .							<b>&gt;</b>	164,	196	231,081			37,702
2	Total number of individuals (inclusion) \$100,000 of reportable compens					ted	above	) who	received more	e than				
													Yes	No
3	Did the organization list any <b>forr</b> on line 1a? <i>If</i> "Yes," complete Sch				e, k • •	ey e	mploy •	ee, o	or highest comp	ensat • •	ed employee	3		No
4	For any individual listed on line 1 organization and related organization and related organization.											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz									ion or	individual for •	5		No
Se	ction B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio ear									g with			
	Nan	<b>(A)</b> ne and business add	dress							Descript	(B) tion of services	C	(C) compen	
												$\pm$		
												-		
	Fotal number of independent conti \$100,000 of compensation from t			ot lın	nited	d to	those	liste	d above) who re	eceive	d more than			

Part V	4 * * *	Statement of Revenue					
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated campaigns 1a					
ट्रं छ	ь	Membership dues 1b					
ಕ್ಷ	c	Fundraising events 1c					
ु ह	_	-	30,398				
ੂ <u>ਰ`ਛ</u>	d	Related organizations 1d					
ર્જું.⊑	е	Government grants (contributions) 1e					
ច្ច	f	All other contributions, gifts, grants, and <b>1f</b>	315,458				
<u>₹</u>	g	similar amounts not included above  Noncash contributions included in					
<u></u> = 0	9	lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	345,856			
<u> </u>							
e E			Business Code				
<u>⊑</u>	2a	SEMINARS	611710	15,340	15,340		
Æ	b						
<u>.</u>	С						
ž	d						
Ж	e						
Program Serwce Revenue		All other programs	<del>                                     </del>				
ð	f	All other program service revenue					
Δ	g	Total. Add lines 2a-2f		15,340			
	3	Investment income (including dividen		·			
		and other similar amounts)	- ·	422,991			422,991
	4	Income from investment of tax-exempt bond	<u> </u>				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents (1) Real	(II) Personal				
	b	Less rental					
	6	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) O ther				
	7a	Gross amount	5,714,293				
		from sales of assets other					
		than inventory					
	b	Less cost or other basis and	5,598,656				
		sales expenses	445 607				
	С	Gain or (loss)	115,637				
	d	Net gain or (loss)	▶	115,637			115,637
	8a	Gross income from fundraising					
≝		events (not including \$					
কু		of contributions reported on line 1c)					
é		See Part IV, line 18					
一 法		а					
Other Revenue	ь	Less direct expenses <b>b</b>					
0	С	Net income or (loss) from fundraising	events 🟲				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
	J.	a					
	b	Less direct expenses b	Lution <b>L</b>				
	100	Net income or (loss) from gaming acti	vides				
	10a	Gross sales of inventory, less returns and allowances . <b>a</b>					
	ь	Less cost of goods sold <b>b</b>					
	С	Net income or (loss) from sales of inve	entory 🟲				
		Miscellaneous Revenue	, Business Code				
	11a	MISCELLANEOUS INCOME	900099	1,080			1,080
			900099	328			328
		VOLUNTEER STIPEND	200033	320			320
	C						
	d	All other revenue					<u> </u>
	e	Total. Add lines 11a-11d	🛌	1,408			
				·			
	12	<b>Total revenue.</b> See Instructions .	· · •	901,232	15,340	0	540,036

## 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) Check if Schedule O contains a response to any question in this Part IX

	heck if Schedule O contains a response to any question in this Part IX	<u></u>			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,050,995	2,050,995		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	195,500	195,500		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	184,217	128,952	55,265	
7	Other salaries and wages	143,205	100,243	42,962	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,173	2,221	952	
9	Other employee benefits	27,461	19,223	8,238	
10	Payroll taxes	26,554	18,588	7,966	
11	Fees for services (non-employees)		,-30	1,220	
 а	Management				
b	Legal	1,278	895	383	
		1,270	093	363	
C	Accounting				
d					
e	Professional fundraising See Part IV, line 17	46.533		46 500	
f	Investment management fees	46,533		46,533	
g	Other	41,590	29,113	12,477	
12	Advertising and promotion	58,507	40,955	17,552	
13	Office expenses	24,940	17,458	7,482	
14	Information technology	19,869	13,908	5,961	
15	Royalties				
16	Occupancy	18,569	12,998	5,571	
17	Travel	56,677	56,677		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	99,065	99,065		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4,516	3,161	1,355	
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)				
а	ADMINISTRATIVE FEES	63,393	19,018	44,375	
b	ORGANIZATIONAL COSTS	2,987	2,091	896	
c	DUES & SUBSCRIPTIONS	670	469	201	
d	UBI TAX	119		119	
e					
f	All other expenses	17,127	10,036	4,300	2,791
25	Total functional expenses. Add lines 1 through 24f	3,086,945	2,821,566	262,588	2,791
26	Joint costs. Check here ► If following	3,000,543	2,021,300	202,300	2,751
	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				
	·				rm <b>990</b> (2011)

Pa	irt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			1	8,420
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		15,030	4	19,101
	5	Receivables from current and former officers, directors, trustees, ke highest compensated employees Complete Part II of	y employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section persons described in section 4958(c)(3)(B) Complete Part II of	on 4958(f)(1)) and			
		Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
8	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges		19,110	9	600
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a			
	ь	Less accumulated depreciation	10Ь		10c	
	11	Investments—publicly traded securities		17,256,694	11	14,670,444
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		1,091,000	13	1,200,000
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		0	15	6,101
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		18,381,834	16	15,904,666
	17	Accounts payable and accrued expenses .		8,227	17	4,674
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
10	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
흕		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .	•		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X o			25	
	26	D		8,227	25	4,674
	26	Total liabilities. Add lines 17 through 25	lines 27	0,221	26	4,074
φ		through 29, and lines 33 and 34.	lines 27			
ž	27	Unrestricted net assets		18,373,607	27	15,899,992
Balance	28	Temporarily restricted net assets		, ,	28	, , , , , , , , , , , , , , , , , , ,
	29	Permanently restricted net assets			29	
r Fund		Organizations that do not follow SFAS 117, check here ► and co lines 30 through 34.	mplete			
0.0	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
25.5	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net /	33	Total net assets or fund balances		18,373,607	33	15,899,992
ž	34	Total liabilities and net assets/fund balances		18 381 834		15 904 666

	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		ç	01,232
2	Total expenses (must equal Part IX, column (A), line 25)	2			86,945
3	Revenue less expenses Subtract line 2 from line 1	3		-2,1	.85,713
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18,3	373,607
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 2	287,902
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		15,8	399,992
Pa	Tt XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? $\cdot$ .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t 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		<b>2</b> c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	☐ Separate basis ☐ Both consolidated and separated basis				
За	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?	•	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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)

### OMB No 1545-0047

Inspection

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization SEATTLE INTERNATIONAL FOUNDATION

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

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

**Employer identification number** 

20-8350995

1	ı A	Citaren, convent	ion of churches, of a	SSUCIALIUM U	churches	section 170()	ッハエハ A ハリ	•						
2	Г A	school described	d in <b>section 170(b)(</b> :	1)(A)(ii). (A	ttach Sched	ule E)								
3	$\Gamma$ A	hospital or a cod	perative hospital se	rvice organi	zatıon descr	rıbed ın <b>secti</b> o	on 170(b)(1	L)(A)(iii).						
4	•	medical researc ospital's name, c	h organızatıon opera ıty, and state	ted in conjur	nction with a	ı hospıtal des	cribed in <b>s</b> e	ection 170(b)	(1)(A)(	iii). Ente	r the			
5	$\Box$	n organization op	erated for the benef	it of a college	e or universi	ity owned or o	perated by	a governmer	ntal unit	describe	- d ın			
		=	( <b>A)(iv).</b> (Complete P	_		•		_						
6	_		local government o		tal unit desc	cribed in <b>sect</b>	ion 170(b)(	(1)(A)(v).						
7	Γ A d	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)												
0	_				(A.)(vi) (Co	mplata Dart I	т \							
8 9	_		: described in <b>sectio</b>					ributions mar	mbarchi	n food o	d aro			
9			at normally receives									55		
			rities related to its e											
		• • • • • •	oss investment inco ganization after June				•		(ax) IIC	om busine	sses			
	_		=	•			•	•						
.0 .1		_	ganized and operate ganized and operate						to carry	out the	ournoc	oc of		
•	0	ne or more public	ly supported organize  ly supported organize  libes the type of support  b	ations desci porting organ	ribed in sect ni <u>za</u> tion and	tion 509(a)(1	) or section es 11e thro	n 509(a)(2) S ugh 11h	See <b>sect</b>		a)(3).	Check		
e f	o s I	ther than foundat ection 509(a)(2) f the organization	ox, I certify that the ion managers and ot received a written d	her than one	or more pul	blicly support	ted organiza	ations describ	oed in s	ection 50	9(a)(:	L) or		
_		heck this box	2006, has the organ	ization acco	ntod any gift	t or contribut	ion from an	v of the				10		
g		ollowing persons?		ization acce	pred any gin	t of contribut	ion nom an	y of the						
			rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	escribed in (ii)	)		Yes	No		
	а	nd (III) below, the	governing body of th	ne the suppo	rted organız	ation?				11g(i)		Νo		
	(	and (III) below, the governing body of the the supported organization?  (ii) a family member of a person described in (i) above?  11g(ii)												
	(	iii) a 35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?				11g(iii)		No		
h			ng information about											
	(:)		(iii) Type of	(iv) Is the		(v) Did you not	ufy the	(vi) Is the						
Na	(i) me of	(ii)	organization (described on	organızatı col (ı) lıst		organizati	on in	organizat	ion in		<b>(vi</b> A mou			
	ported	EIN	lines 1 - 9 above	your gove		col (ı) of		col (ı) org			supp			
rgar	nızatıon		or IRC section	docume	nt?	suppor	( /	ın the U	5 ′					
			(see instructions))	Yes	No	Yes	No	Yes	No					
A) Th	łE	<u> </u>	mocractions//			1		1	<del>                                     </del>					
EATT		916013536	7	Yes		Yes		Yes			2,3	09,888		
		1												

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page <b>2</b>
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	<b>(b)(1)(A)(iv)</b> I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	(e) 2011	( <b>f</b> ) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	<b>Public Support.</b> Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	<b>endar year</b> (or fiscal yea	r beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV ) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions )			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and <b>sto</b>	p here						<b>▶</b> □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and <b>stop here.</b> The org  33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and <b>stop here.</b> The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	<b>2010.</b> If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	<b>▶</b>
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization  Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	<b>►</b> □

**▶**□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) 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 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Schedule A	(Form	990	or 99	0-EZ)	2011)
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Page **4** 

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

#### **Facts And Circumstances Test**

#### **Explanation**

SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION SCHEDULE A, PART I, LINE 11H, COLUMN (VII) - AMOUNT OF SUPPORT PAID GRANTS PAID TO THE SEATTLE FOUNDATION 54,000 AMOUNTS FOR THE BENEFIT OF THE SEATTLE FOUNDATION 2,192,495 EXPENSES PAID TO THE SEATTLE FOUNDATION 63,393 TOTAL 2,309,888

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493319053242

OMB No 1545-0047

Open to Public Inspection

#### **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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

	me of the organization TTLE INTERNATIONAL FOUNDATION		Employer identification number						
) [ <i>P</i>	THE INTERNATIONAL FOUNDATION		20-8350995						
Pa	rt I Organizations Maintaining Donor Ad		1						
	organization answered "Yes" to Form 99	-							
		(a) Donor advised funds	(b) Funds and other accounts						
	Total number at end of year								
	Aggregate contributions to (during year)								
	Aggregate grants from (during year)								
	Aggregate value at end of year								
	Did the organization inform all donors and donor advifunds are the organization's property, subject to the		or advised <b>Yes No</b>						
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit								
5	rt II Conservation Easements. Complete	if the organization answered "Ves" to	<u> </u>						
٢	•		7 TOTHI 990, Part IV, line 7.						
	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreati		historically importantly land area						
	Protection of natural habitat		ertified historic structure						
	Preservation of open space	,							
	Complete lines 2a-2d if the organization held a quali easement on the last day of the tax year	fied conservation contribution in the form	of a conservation						
	casement on the fact day or the tax year	Γ	Held at the End of the Year						
	Total number of conservation easements	F	2a						
)	Total acreage restricted by conservation easements	ļ	2b						
:	Number of conservation easements on a certified his	toric structure included in (a)	2c						
1	Number of conservation easements included in (c) ac	· · · · •	2d						
•									
	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organization during						
	the taxable year ▶								
	Number of states where property subject to conserva	ition easement is located ►	_						
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		lling of violations, and <b>Yes No</b>						
	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year ►						
	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year						
	<b>▶</b> \$	5	,						
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion Yes No						
	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of t								
	the organization's accounting for conservation easen								
a l'	Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.							
а	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	h in furtherance of public service,						
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in							
	(i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$						
	(ii) Assets included in Form 990, Part X		<u></u> -						
	If the organization received or held works of art, histo	orical treasures, or other similar assets fo	r financial gain, provide the						
	following amounts required to be reported under SFA		<b>3, 6</b> <del>-</del> - <del>-</del>						
3	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> - \$						

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	torio	cal Tr	easur	es, or O	ther	Similar A	sset	(con	tinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	_		_		e of its colle	ction		
а	Public exhibition		d	Γ	Loan	or excha	ange progi	ams				
b	Scholarly research		e	$\sqcap$	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ıın hov	v they	furthe	er the org	ganızatıon	's exe	empt purpose	e in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								lar	<b>Γ</b> γ <sub>6</sub>	es	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y€	s" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	itions or	other ass	ets n	ot	Γ <b>γ</b>	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	ible		Г	ı				
_							ŀ	-		moun		
C C	Beginning balance						-	1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fo		e 21?							Γ Ye	es	∏ No
	If "Yes," explain the arrangement in Part XIV							_				
Pa	<b>Endowment Funds.</b> Complete	f the organization (a)Current Year		were Prior Y			orm 990, Years Back		IV, line 10 hree Years Back		our Vos	are Back
la	Beginning of year balance	(a)Current rear	(0)	PHOL	ear	(c) I WO	Tears back	(a)	niee rears back	(е)г	our rea	ars Back
b	Contributions											
c	Investment earnings or losses							+				
d	Grants or scholarships											
e	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon t	that a	re held	d and ad	mınıstere	d for t	he	[·	Yes	No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations								38	a(ii)		
	If "Yes" to 3a(II), are the related organizatio									3b		
4	Describe in Part XIV the intended uses of th											
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	irt X,	line 1	10.						
	Description of property					or other estment)	( <b>b)</b> Cost or basis (ot		(c) Accumula depreciatio		( <b>d</b> ) Bo	ok value
1a	_and		•									
b	Buildings		•									
	_easehold improvements											
С												
	Equipment		•									
d	Equipment	<u>.</u>										

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
	•	
Part VIII Investments—Program Related. Se		13. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
(1) GLOBAL PARTNERS MICRO	1,000,000	
(2) GLOBAL PARTNERS SOCIAL	200,000	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, II  (a) Descri		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) Amount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )		

	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ILS	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
	Total expenses (Form 990, Part IX, column (A), line 25)	2	
	Excess or (deficit) for the year Subtract line 2 from line 1	3	
	Net unrealized gains (losses) on investments	4	
	Donated services and use of facilities	5	
	Investment expenses	6	
	Prior period adjustments	7	
		8	
	Other (Describe in Part XIV)		
	Total adjustments (net) Add lines 4 - 8	9	
)	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
14	Reconciliation of Revenue per Audited Financial Statements With Revenue p		eturn
	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments		
)	Donated services and use of facilities		
:	Recoveries of prior year grants		
ı	Other (Describe in Part XIV)		
•	Add lines <b>2a</b> through <b>2d</b>	2e	
	Subtract line <b>2e</b> from line <b>1</b>	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
	Other (Describe in Part XIV)		
	Add lines <b>4a</b> and <b>4b</b>	4c	
	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	
rt	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
	Total expenses and losses per audited financial statements	1	
	A mounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities		
)	Prior year adjustments		
	Other losses		
	Other (Describe in Part XIV) 2d		
:	Add lines <b>2a</b> through <b>2d</b>	2e	
	Subtract line <b>2e</b> from line <b>1</b>	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
•	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
•	Other (Describe in Part XIV)		
	Add lines <b>4a</b> and <b>4b</b>	4c	
3			
!	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	

Identifier Return Reference Explanation

additional information

DLN: 93493319053242

OMB No 1545-0047

**SCHEDULE F** (Form 990)

## **Statement of Activities Outside the United States**

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

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service

Name of the organization SEATTLE INTERNATIONAL FOUNDATION **Employer identification number** 

					20-8350995	
Pa	General Informatio "Yes" to Form 990, Pa			he United States. C	Complete if the organiz	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization r gibility for the	maıntaın recor grants or assı	stance, and the select	cion criteria used to awa	
2	<b>For grantmakers.</b> Describe in Pa United States	rt V the organi	zatıon's procedu	res for monitoring the us	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	space is needed	)		
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	193,500
	NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	2,000
	-					
	-					
	Sub-total	0	0			195,500
	<ul> <li>Total from continuation sheets</li> <li>to Part I</li> </ul>	0	١			U

c Totals (add lines 3a and 3b)

195,500

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN -	\$45,000 TO SUPPORT THE ORGANIZATIONAL CAPACITY AND GRANTS TO 8-10 YOUNG WOMEN'S GROUPS IN CENTRAL AMERICA AND GENERAL CAPACITY BUILDING, \$5,000 TO SUPPORT PARTICIPATION IN SIF'S REGIONAL GRANTEE MEETING	50,000	WIRE TRANSFER		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN -	FCAM WORKS TO PROMOTE THE CIVIC PARTICIPATION OF YOUNG WOMEN AND THE PROTECTION OF WOMEN'S RIGHTS THROUGHOUT CENTRAL AMERICA	9,500	WIRE TRANSFER		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE SUPPORT FOR YOUTH LEADERSHIP AND COMPUTER TRAINING PROGRAMS IN PUERTO BARRIOS, GUATEMALA		WIRE TRANSFER		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT YOUTH LEADERSHIP AND COMPUTER TRAINING IN PUERTO BARRIOS, GUATEMALA	8,000	WIRE TRANSFER		N/A	N/A
		AND THE CARIBBEAN	TO SUPPORT RED CENTROAMERICAN DE CENTROS DE PENSAMIENTO E INCIDENCIA (LARED)		WIRE TRANSFER		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT ONGOING RESEARCH ON POVERTY IN CENTRAL AMERICA AND PROVIDE TECHNICAL ASSISTANCE TO SIF'S CENTRAL AMERICA NETWORK	25,000	WIRE TRANSFER		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	ASOGEN PROMOTES THE INVOLVEMENT OF YOUTH (PARTICULARLY YOUNG WOMEN LIVING IN BOTH URBAN AND RURAL AREAS SURROUNDING CHIMALTENANGO), TO BECOME MORE CIVICALLY INVOLVED- ESPECIALLY AROUND ACCESSING EDUCATIONAL OPPORTUNITIES AND PROMOTING REPRODUCTIVE RIGHTS	7,000	WIRE TRANSFER		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO BUILD A NETWORK OF INDIGENOUS AND RURAL WOMEN'S ORGANIZATIONS THROUGHOUT GUATEMALA AND THE REGION, WITH PARTICIPATION OF 250 MEN AND WOMEN FUNDS WILL ALSO SUPPORT THE ORGANIZATION'S ROLE IN COORDINATING THE GUATEMALAN PROGRAM OF THE REGIONAL HUMAN RIGHTS	50,000	WIRE TRANSFER		N/A	N/A
Enter total nu	mher of recipi	ent organizations lis	tod above that are re	accompand as sharet	yes by the foreign s	ountry recognized	25	

2 tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . . . . . . .

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earry 000) 2011

## Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	[	Yes	1	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	i	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	i	্ব	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	i	굣	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	i	굣	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	<b>.</b>	ᅜ	Νo

Schedule F (Form 990) 2011

#### Part V Supplemental Information

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

Identifier ReturnReference Explanation  PROCEDURE FOR MONITORING SCHEDULE F, PART I, LINE 2 WE CONDUCT PRE-GRANT INQUIRIES, HAVE GRANT AGREEMENTS, PROVIDE A SEPARATE ACCOUNTING OF THE FUNDS, AND INVESTIGATE ANY DIVERSIONS FOR ALL GRANTS LEAVING THE UNITED STATES AS REQUIRED THE GRANTEE IS EXPECTED TO PROVIDE A REPORT ON HOW THE MONEY WAS SPENT AND WHAT PROGRAM AREAS WERE IMPACTED.	information.	•	· · · · · · · · · · · · · · · · · · ·
INQUIRIES, HAVE GRANT AGREEMENTS, PROVIDE A SEPARATE ACCOUNTING OF THE FUNDS, AND INVESTIGATE ANY DIVERSIONS FOR ALL GRANTS LEAVIN THE UNITED STATES AS REQUIRED THE GRANTEE IS EXPECTED TO PROVIDE A REPORT ON HOW THE MONEY WAS SPENT AND WHAT PROGRAM AREAS WERE IMPACTED SCHEDULE F, PART IV, LINE 1 FORM 926 IS NOT REQUIRE TO BE FILED BECAUSE THE TRANSFER TO A FOREIGN CORPORATION DOES NOT MEET THE REPORTING	Identifier	ReturnReference	
REQUIREMENTS IN IRC SEC 6038(A)(1)(A)			INQUIRIES, HAVE GRANT AGREEMENTS, PROVIDE A SEPARATE ACCOUNTING OF THE FUNDS, AND INVESTIGATE ANY DIVERSIONS FOR ALL GRANTS LEAVING THE UNITED STATES AS REQUIRED THE GRANTEE IS EXPECTED TO PROVIDE A REPORT ON HOW THE MONEY WAS SPENT AND WHAT PROGRAM AREAS WERE IMPACTED SCHEDULE F, PART IV, LINE 1 FORM 926 IS NOT REQUIRED TO BE FILED BECAUSE THE TRANSFER TO A FOREIGN CORPORATION DOES NOT MEET THE REPORTING
			REQUIREMENTS IN IRC SEC 6038(A)(1)(A)
Schedule F (Form 990) 2011			

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

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

2011

DLN: 93493319053242

Open to Public
Inspection

Schedule I (Form 990) 2011

Name of the organization Employer identification number SEATTLE INTERNATIONAL FOUNDATION 20-8350995 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . . . . . . 

Cat No 50055P

ochicadic i	(101111330) 2011									
Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, In Use Schedule I-1 (Form 990) if additional space is needed.										
		(1)				(05)				

(a)Type of grant or assistance	(b)Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	'	SCHEDULE I, PART I, LINE 2 DUE DILIGENCE IS PERFORMED ON ALL GRANT RECOMMENDATIONS BY THE GRANTS ADMINISTRATOR GRANTS ARE REVIEWED AND APPROVED BY THE SUPPORTING ORGANIZATION BOARD OR THE SUPPORTING ORGANIZATION GRANT COMMITTEE PRIOR TO DISTRIBUTION A QUORUM MUST BE MET FOR DISTRIBUTION

Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	( <b>g</b> ) Description of non-cash assistance	(h) Purpose of grant or assistance
AMIGOS DE SANTA CRUZPO BOX 148 LOPEZ ISLAND, WA 982610148	91- 2155843	509(A)(1) OR (A)(2)		0	N/A	N/A	TO SUPPORT THE SECOND PHASE OF DEVELOPMENT FOR THE CECAP VOCATIONAL TRAINING CENTER, FOCUSING PRIMARILY ON INDIGENOUS PEOPLE AND WOMEN IN SANTA CRUZ, GUATEMALA
AMIGOS DE SANTA CRUZPO BOX 148 LOPEZ ISLAND, WA 982610148	91- 2155843	509(A)(1)OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASHOKA INNOVATORS FOR THE PUBLIC1700 N MOORE ST STE 2000 ARLINGTON, VA 222091921	51- 0255908	509(A)(1)OR (A)(2)	16,120	0	N/A	N/A	TO SUPPORT THE PARTICIPATION OF SIF'S CENTRAL AMERICAN PARTNERS IN A SERIES OF MEETINGS HOSTED BY USAID, THE US STATE DEPARTMENT, AND THE ORGANIZATION OF AMERICAN STATES, IN WASHINGTON DC IN JUNE, AROUND YOUTH VIOLENCE IN CENTRAL AMERICA
AYNI EDUCATION INTERNATIONALPO BOX 17672 SEATTLE, WA 981271301	26- 4215477	509(A)(1) OR (A)(2)		0	N/A	N/A	TO CARRY OUT A  LITERACY COURSE AND VOCATIONAL TRAINING IN THE BALKH PROVINCE OF AFGHANISTAN (LEARNING FOR LIFE, LITERACY PROJECT) TO BE OFFERED TO 150 OLDER GIRLS AND YOUNGER WOMEN WITHOUT EDUCATIONAL OPPORTUNITIES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAHIA STREET 1005 NE BOAT ST SEATTLE, WA 98105	91- 1841926	509(A)(1)OR (A)(2)		0	N/A	N/A	TO FUND A COMPREHENSIVE EDUCATION PROGRAM AND PROVIDE SOCIAL DEVELOPMENT SUPPORT FOR 60 IMPOVERISHED GIRLS, AS WELL AS FAMILY MEMBERS AND COMMUNITY MEMBERS, IN BAHIA, BRAZIL
BAINBRIDGE OMETEPE SISTER ISLAND ASSOCIATIONPO BOX 4484 ROLLINGBAY, WA 980610484	91- 1433369	509(A)(1) OR (A)(2)		0	N/A	N/A	TO FUND SIX HEALTHCARE FACILITIES TO CARRY OUT INFRASTRUCTURE IMPROVEMENT PROJECTS AND COMMUNITY- INITIATED HEALTH EDUCATION PROJECTS ON THE ISLAND OF OMETEPE, NICARAGUA

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BURKITT'S LYMPHOMA KENYA FUNDPO BOX 20521 SEATTLE, WA 981021521	27- 1829868	509(A)(1) OR (A)(2)	10,000	0	N/A	N/A	TO PROVIDE CHEMOTHERAPY DRUGS FOR APPROXIMATELY 200 PATIENTS, IMPROVE THE TREATMENT RATE BY COVERING TRANSPORTATION AND ADDITIONAL COSTS FOR PATIENTS' FAMILIES, AND PROVIDE TRAINING FOR MEDICAL PERSONNEL
CENTER FOR GLOBAL DEVELOPMENT1800 MASSACHUSETTS AVE NW 3RD FL WASHINGTON, DC 20036	52- 2351337	509(A)(1) OR (A)(2)	150,000	0	N/A	N/A	TO SUPPORT RESEARCH AND THE PUBLICATION OF A SPECIAL REPORT AND OTHER MATERIALS RELATED TO POVERTY AND DEVELOPMENT IN CENTRAL AMERICA

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CENTER FOR US GLOBAL LEADERSHIP COALITION1129 20TH ST NW STE 600 WASHINGTON, DC 200363455	74- 3093659	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT
CLEAR PATH INTERNATIONAL321 HIGH SCHOOL RD NE STE D3 574 BAINBRIDGE ISLAND, WA 981102648	03- 0468552	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE 900 REFUGEES, THEIR FAMILY MEMBERS AND THEIR COMMUNITIES (ALONG THE THAI-BURMESE BORDER IN THE ETHNIC SHAN STATE OF BURMA) WITH MICRO- CREDIT LOANS, BUSINESS START- UP SUPPORT, AGRICULTURAL TRAINING, AND PROSTHETICS CARE TO INCREASE ECONOMIC OPPORTUNITIES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DUE PROCESS OF LAW FOUNDATION 1779 MASSACHUSETTS AVE NW STE 510A WASHINGTON, DC 200362105	52- 1973930	509(A)(1) OR (A)(2)	65,000	0	N/A	N/A	CONTINUED SUPPORT TO DPLF'S CENTRAL AMERICA NETWORK, PROVIDING TECHNICAL ASSISTANCE TO NGOS WORKING ON JUDICIAL TRANSPARENCY AND INDEPENDENCE ISSUES IN THE REGION
EARTHCORPS6310 NE 74TH ST STE 201E SEATTLE, WA 981158168	91- 1592071	509(A)(1) OR (A)(2)		0	N/A	N/A	TO SUPPORT AND ORGANIZE SEATTLE ORGANIZATIONS WORKING TO SEEK GOVERNMENT FUNDING FOR SEATTLE-BASED WOMEN'S LEADERSHIP EXCHANGE PROGRAMS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
EARTHCORPS6310 NE 74TH ST STE 201E SEATTLE, WA 981158168	91- 1592071	509(A)(1)OR (A)(2)	15,000	0	N/A	N/A	TO PROVIDE 6 WOMEN LEADERS FROM AROUND THE WORLD WITH ENVIRONMENTAL RESTORATION, COMMUNITY BUILDING AND VOLUNTEER MANAGEMENT TRAINING THROUGH A SIX MONTH PROGRAM IN SEATTLE
ENVIRONMENTAL LAW ALLIANCE WORLDWIDE1877 GARDEN AVE EUGENE, OR 974031927	94- 3116602	509(A)(1)OR (A)(2)		0	N/A	N/A	TO SUPPORT THE REGIONAL CONFERENCE OF ELAW AND SIF PARTNERS IN EL SALVADOR IN 2012

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETTA PROJECTS 13624 VINTAGE DR SW PORT ORCHARD, WA 983679200	33- 1055457	509(A)(1) OR (A)(2)	14,000	0	N/A	N/A	TO TRAIN 18  WOMEN FROM 9  VILLAGES IN RURAL  BOLIVIA TO  BECOME  COMMUNITY  HEALTH  PROMOTERS,  INCLUDING A  HEALTH TRAINING  (DESIGNED BY THE  MINISTRY OF  HEALTH) AND A  SPECIAL  COMMUNICATIONS  WORKSHOP TO  ENHANCE THE  PROMOTERS  ABILITY TO LEAD  COMMUNITY-LEVEL  EDUCATION
FACING THE FUTURE811 1ST AVE STE 454 SEATTLE, WA 981041429	91- 1678158	509(A)(1) OR (A)(2)	15,000	0	N/A		TO SUPPORT GENERAL OPERATING SUPPORT TO FACING THE FUTURE (FTF) TO PROVIDE COST EFFECTIVE, STANDARDS-BASED EDUCATIONAL RESOURCES, REACHING LARGE NUMBERS OF STUDENTS FROM A VARIETY OF BACKGROUNDS AND COUNTRIES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR MANAGEMENT EDUCATION IN CENTRAL AMERICA PO BOX 639 GLEN ECHO, MD 208120639	54- 1492775	509(A)(1) OR (A)(2)		0	N/A	N/A	TO SUPPORT THE CENTRAL AMERICA LEADERSHIP INITIATIVE (CALI) TO PROVIDE GENERAL OPERATING SUPPORT
GLOBAL PARTNERSHIPS909 NE BOAT ST STE 200 SEATTLE, WA 981056672	82- 0574491	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL VISIONARIES2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71- 0872239	509(A)(1)OR (A)(2)	12,500	0	N/A	N/A	TO INVEST IN THE ORGANIZATIONAL CAPACITY OF GV STAFF (PARTICULARLY GUATEMALAN STAFF) IN ORDER TO SCALE PROGRAMS AND TRAIN STAFF IN GUATEMALA ON BEST-PRACTICES AND OTHER MANAGEMENT ISSUES
GLOBAL WASHINGTON909 NE BOAT ST STE 300 SEATTLE, WA 981056672	27- 0521628	509(A)(1) OR (A)(2)		0	N/A	N/A	\$100,000 FOR 2011  GENERAL  OPERATING  SUPPORT, \$50,000  TO DEVELOP A  MARKETING AND  PUBLIC RELATIONS  STRATEGY TO  PROMOTE GLOBAL  WASHINGTON'S  WORK AND BUILD  SUPPORT, AND  \$50,000 TO  SUPPORT A PUBLIC  RELATIONS  CAMPAIGN FOR  GLOBAL  WASHINGTON'S  MEMBERS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	( <b>g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL WASHINGTON500 UNION ST STE 801 SEATTLE, WA 981014046	27- 0521628	509(A)(1) OR (A)(2)	1	0	N/A	N/A	TO SUPPORT A SURVEY TO DETERMINE PUBLIC OPINION REGARDING KEY DEVELOPMENT ISSUES AND THE DEVELOPMENT SECTOR IN WASHINGTON
GLOBAL WOMEN'S PHILANTHROPY PROJECTEVANS SCHOOL OF PUBLIC AFFAIRS UNIVERSITY OF WASHINGTON PO BOX 353 SEATTLE, WA 98195	94- 3079432	509(A)(1) OR (A)(2)	1	0	N/A	N/A	TO SUPPORT RESEARCH, TRAVEL AND EVENTS TO FACILITATE DIALOGUE WITH DONORS IN CHINA TO SUPPORT THE CREATION OF A WWF MODEL FOR WOMEN PHILANTHROPISTS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ILEAP THE CENTER FOR CRITICAL SERVICEPO BOX 15405 SEATTLE, WA 981150405	20- 1347313	509(A)(1) OR (A)(2)	60,000	0	N/A	N/A	TO SUPPORT THE CENTRAL AMERICA WOMEN'S LEADERSHIP PROGRAM, A TEN WEEK LEADERSHIP AND SOCIAL INNOVATION TRAINING PROGRAM FOR FEMALE COMMUNITY LEADERS FROM CENTRAL AMERICA
ILEAP THE CENTER FOR CRITICAL SERVICEPO BOX 15405 SEATTLE, WA 981150405	20- 1347313	509(A)(1) OR (A)(2)		0	N/A	N/A	\$24,980 OF THIS GRANT WILL SUPPORT THE GLOBAL WOMEN'S LEADERSHIP PROGRAM, A TEN WEEK LEADERSHIP AND SOCIAL INNOVATION TRAINING PROGRAM FOR WOMEN GRASSROOTS LEADERS FROM THE DEVELOPING WORLD, INCLUDING CENTRAL AMERICA

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ILEAP THE CENTER FOR CRITICAL SERVICEPO BOX 15405 SEATTLE, WA 981150405	20- 1347313	509(A)(1)OR (A)(2)	15,000	0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT FOR ILEAP CENTER FOR CRITICAL SERVICE TO SUPPORT THE INTERNATIONAL FELLO WSHIP PROGRAM IN SEATTLE
INITIATIVE FOR GLOBAL DEVELOPMENT 1215 4TH AVE STE 650 SEATTLE, WA	20- 8003146	509(A)(1) OR (A)(2)	50,000	0	N/A	N/A	TO PROVIDE  GENERAL  OPERATING SUPPORT TO FUND IGD

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUST ASSOCIATES 2040 S ST NW 300 WASHINGTON, DC 200091110	06- 1597668	509(A)(1) OR (A)(2)	50,000	0	N/A	N/A	TO SUPPORT A REGIONAL INITIATIVE TO STRENGTHEN THE LEADERSHIP AND CAPACITY OF WOMEN HUMAN RIGHTS DEFENDERS AND INDIGENOUS WOMEN THROUGH VARIOUS REGIONAL MEETINGS, WORKSHOPS, AND OTHER ACTIVITIES IN HONDURAS AND GUATEMALA
KPLU12180 PARK AVE S TACOMA, WA 984470001	91- 0565571	509(A)(1)OR (A)(2)	25,000	0	N/A	N/A	TO PROVIDE GENERAL SUPPORT

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LANDESA1411 4TH AVE STE 910 SEATTLE, WA 981012204	91- 1158970	509(A)(1) OR (A)(2)	6,000	0	N/A	N/A	TO SPONSOR THE 5TH ANNUAL, SEED THE CHANGE LUNCHEON ON MARCH 15, 2011, IN CELEBRATION OF INTERNATIONAL WOMEN'S DAY
LINGOS GLOBAL 3834 94TH AVE NE BELLEVUE, WA 980041320	20- 3100992	509(A)(1) OR (A)(2)	30,000	0	N/A	N/A	TO IDENTIFY, TRAIN AND SUPPORT ORGANIZATIONS IN GUATEMALA INTERESTED IN INCREASING THE EFFECTIVENESS OF THEIR ORGANIZATIONS BY IMPROVING THE PROJECT MANAGEMENT CAPACITY OF THEIR STAFF AND PARTNERS PROJECT MANAGEMENT COURSES WILL REACH 100 DIRECT BENEFICIARIES

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITERACY BRIDGE PO BOX 1256 SEATTLE, WA 981111256	26- 1335205	509(A)(1)OR (A)(2)	12,500	0	N/A	N/A	TO REDUCE CHILD MORTALITY AND IMPROVE MATERNAL HEALTH THROUGH A LOW- COST AUDIO DEVICE DESIGNED TO ALLOW ILLITERATE MOTHERS TO LEARN MORE EFFECTIVELY FROM LOCAL HEALTH EXPERTS AND BETTER ADOPT NEW MATERNAL PRACTICES
MAASAI ASSOCIATION9511 LAKE WASHINGTON BLVD NE BELLEVUE, WA 980045408	91- 2118319	509(A)(1)OR (A)(2)	12,500	0	N/A	N/A	TO OPERATE A WEEKLY MOBILE CLINIC PROVIDING BASIC AND QUALITY HEALTHCARE SERVICES, PREVENTATIVE CARE, AND IMMUNIZATION DELIVERY TO WOMEN AND CHILDREN IN SIX VILLAGES IN THE MERRUESHI REGION OF SOUTHEASTERN KENYA, SERVING 6,000 VILLAGERS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MED25 INTERNATIONALPO BOX 1459 MERCER ISLAND, WA 980401459	20- 8044441	509(A)(1)OR (A)(2)	50,000	0	N/A	N/A	TO SUPPORT THE MEDICAL CLINIC IN MBITA, KENYA SINCE 2010, THE MBITA CLINIC HAS TREATED OVER 7,000 PATIENTS, IN ADDITION TO HEALTH CARE WORKERS PROVIDING INFORMATION AND MEDICAL ASSISTANCE IN AN ADDITIONAL 20,000 CASES
MONA FOUNDATION 13922 64TH PL W EDMONDS,WA 980263201	91- 1968512	509(A)(1) OR (A)(2)	10,000	0	N/A	N/A	TO PROVIDE SUPPORT FOR THE DIGITAL STUDY HALL TO IMPROVE EDUCATION FOR DISADVANTAGED CHILDREN IN RURAL AND SLUM SCHOOLS IN INDIA BY BUILDING AND TESTING A SYSTEM TO HELP TEACHERS AND STUDENTS USE APPROPRIATE TECHNOLOGY AND LOCAL RESOURCES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE BY ONE4041 ROOSEVELT WAY NE STE C SEATTLE, WA 981056440	20- 4434900	509(A)(1) OR (A)(2)	10,000	0	N/A	N/A	TO SUPPORT COMPREHENSIVE FISTULA TREATMENT SERVICES AND CRITICAL PREVENTION ACTIVITIES IN WESTERN KENYA FUNDS WILL SPECIFICALLY SUPPORT THE TRAINING OF REGIONAL REPRESENTATIVES TO CARRY OUT EDUCATIONAL PROGRAMS AROUND FISTULA- BOTH TREATMENT AND PREVENTION
ONE EQUAL HEART FOUNDATION1620 BROADWAY STE 205 SEATTLE, WA 981222564	20- 3917811	509(A)(1) OR (A)(2)	10,000	0	N/A	N/A	TO SUPPORT TSELTAL MAYAN WOMEN IN MEXICO AND THEIR CHILDREN BY PROVIDING NUTRITIONAL SUPPLEMENTS AND ANTI-PARASITICS, AS WELL AS PROVIDE TRAINING AND START-UP RESOURCES FOR MOTHERS TO CREATE HOME GARDENS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OXFAM AMERICA 226 CAUSEWAY ST 5TH FLOOR BOSTON, MA 02114	23- 7069110	509(A)(1) OR (A)(2)		0	N/A	N/A	TO ENGAGE AND ORGANIZE 19 CIVIL SOCIETY ORGANIZATIONS TO PREPARE A SPECIFIC RECOMMENDATION TO USAID REGARDING THE FEED THE FUTURE STRATEGY IN GUATEMALA, WHICH INCLUDES \$24 05 MILLION IN FUNDING FOR THE FIRST TWO YEARS
PATHPO BOX 900922 SEATTLE, WA 981099715	91- 1157127	509(A)(1)OR (A)(2)		0	N/A	N/A	TO SUPPORT THE REACH CAMPAIGN

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PEACE TREES VIETNAM1301 5TH AVE STE 2500 SEATTLE, WA 981012673	20- 1051471	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT
PHILANTHROPY NORTHWEST2101 4TH AVE STE 650 SEATTLE, WA 981212357	91- 1110995	509(A)(1) OR (A)(2)	10,000	0	N/A	N/A	TO SUPPORT THE 2012 TRENDS REPORT SPECIFICALLY, FUNDS WILL BE USED TO RESEARCH AND PREPARE A SPECIAL SECTION ON INTERNATIONAL

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PHILANTHROPY NORTHWEST2101 4TH AVE STE 650 SEATTLE, WA 981212357	91- 1110995	509(A)(1) OR (A)(2)	4,100	0	N/A	N/A	TO RENEW SIF'S ANNUAL MEMBERSHIP, TO PROMOTE ITS MISSION AND CREATE OPPORTUNITIES FOR COLLABORATION WITH OTHER PACIFIC NORTHWEST DONORS
PRE-VENT800 FIFTH AVE STE 4100 SEATTLE, WA 981043100	27- 1765195	509(A)(1) OR (A)(2)	15,000	0	N/A	N/A	TO SUPPORT THE COMPLETION OF THE EDUCATION CENTER IN MONTERRICO, GUATEMALA TO SERVE AS A TRAINING SITE FOR HEALTH PROMOTERS AND LAY MIDWIVES, DEVELOP A CURRICULUM FOR THE MIDWIFE AND PROMOTER TRAINING PROGRAM, CONDUCT THE TRAINING PROGRAM, AND CARRY OUT PROGRAM OPERATIONS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
PROSTHETICS OUTREACH FOUNDATION400 E PINE ST STE 225 SEATTLE, WA 981222300	91- 1453216	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE ORTHOPEDIC SUPPORT TO CHILDREN AND OTHER PEOPLE WITH DISABILITIES IN VIETNAM, BANGLADESH, SIERRA LEONE, AS WELL AS EXPAND NEW PROGRAMS IN LIBERIA AND HAITI
PROSTHETICS OUTREACH FOUNDATION400 E PINE ST STE 225 SEATTLE, WA 981222300	91- 1453216	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROSTHETICS OUTREACH FOUNDATION400 E PINE ST STE 225 SEATTLE, WA 981222300	91- 1453216	509(A)(1) OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL SUPPORT
TEENSMART INTERNATIONAL DUKE UNIVERSITY SCHOOL OF NURSING DUMC 3322 307 TRENT DRIVE DURHAM,NC 22710	20- 0311647	509(A)(1) OR (A)(2)		0	N/A		TO SUPPORT THE DEVELOPMENT OF TEENSMART'S NEW ONLINE COURSE ON VIOLENCE PREVENTION AND HEALTHY LIVING HABITS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TEENSMART INTERNATIONAL107 APPLE CART WAY MORRISVILLE, NC 275607489	20- 0311647	509(A)(1)OR (A)(2)	45,000	0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT FOR TEENSMART'S PROGRAMS SERVING AT- RISK YOUTH IN NICARAGUA THIS GRANT IS MADE IN PARTNERSHIP, AND WITH THE FINANCIAL SUPPORT, OF THE STRACHAN FOUNDATION IN COSTA RICA
THE BROOKINGS INSTITUTION1175 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	53- 0196577	509(A)(1) O R (A)(2)	75,000	0	N/A	N/A	TO BUILD ON THE SUCCESS OF THE JUNE 23RD SUMMIT BY CREATING A TASK-FORCE TO MONITOR AND INFLUENCE US FUNDING (CARSI) TO THE REGION GRANT ACTIVITIES INCLUDE AT LEAST ONE MEETING IN CENTRAL AMERICA, A BROOKINGS EVENT IN DC WITH LEADERS FROM THE REGION, AND

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SEATTLE FOUNDATION1200 5TH AVE STE 1300 SEATTLE, WA 981013151	91- 6013536	509(A)(1)	50,000	0	N/A	N/A	TO SUPPORT 2011 GIVEBIG
THE SEATTLE FOUNDATION1200 5TH AVE STE 1300 SEATTLE, WA 981013151	91- 6013536	509(A)(1)	4,000	0	N/A	N/A	TO SUPPORT GIVE2CUBA, A US POOLED GIVING FUND TO SUPPORT ANTI- POVERTY AND DEVELOPMENT EFFORTS IN CUBA THIS GRANT IS MADE POSSIBLE FROM INDIVIDUAL DONATIONS TO

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SEATTLE TIMESPO BOX 70 SEATTLE, WA 981110070		N/A	15,000	0	N/A		TO EXPAND COVERAGE ON WASHINGTON STATE NONPROFITS WORKING GLOBALLY, INCLUDING SIF GRANTEES AND GLOBAL WASHINGTON MEMBERS
UNIVERSITY OF WASHINGTONBOX 359515 CORP FDN RELATIONS SEATTLE, WA 981951210	94- 3079432	509(A)(1) OR (A)(2)		0	N/A	N/A	TO SUPPORT THE FOSTER SCHOOL OF BUSINESS 2011 GLOBAL SOCIAL ENTREPRENEURSHIP COMPETITION

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTONBOX 359515 CORP FDN RELATIONS SEATTLE, WA 981951210	94- 3079432	509(A)(1)OR (A)(2)	12,500	0	N/A	N/A	TO SUPPORT ENGINEERS WITHOUT BORDERS TO INSTALL NEW STOVES AND REPLACE THATCH ROOFS IN COLLABORATION WITH RESIDENTS AND COMMUNITY MEMBERS IN TACONI, BOLIVIA
UNIVERSITY OF WASHINGTONBOX 359515 CORP FDN RELATIONS SEATTLE, WA 981951210	94- 3079432	509(A)(1) OR (A)(2)	15,000	0	N/A	N/A	TO SUPPORT THE CAMBODIA SOCIAL WORK PROGRAM TO ESTABLISH AND SUSTAIN THE FIRST UNIVERSITY LEVEL SOCIAL WORK PROGRAM IN CAMBODIA, TO TRAIN INDIVIDUALS TO BECOME SKILLED PROFESSIONALS, ADDRESSING POVERTY AND THE CONSEQUENCES OF GENOCIDE AND CIVIL WAR

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNIVERSITY OF WASHINGTONBOX 359515 CORP FDN RELATIONS SEATTLE, WA 981951210	94- 3079432	509(A)(1) OR (A)(2)	13,500	0	N/A	N/A	TO SUPPORT THE FOSTER SCHOOL OF BUSINESS GLOBAL SOCIAL ENTREPRENEURSHIP COMPETITION
VILLAGEREACH601 N 34TH ST SEATTLE, WA 98103	91- 2083484	509(A)(1) OR (A)(2)	15,000	0	N/A	N/A	TO REDUCE MATERNAL AND NEONATAL MORBIDITY AND MORTALITY IN THE KWITANDA COMMUNITY OF MALAWI THROUGH THE ESTABLISHMENT AND EXPANSION OF MATERNAL AND NEWBORN HEALTH CARE SERVICES, COMMUNITY EDUCATION PROGRAMS, AND COMMUNITY MOBILIZATION ACTIVITIES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON OFFICE ON LATIN AMERICA1666 CONNECTICUT AVE NW SUITE 400 WASHINGTON, DC 20009	52- 1249353	509(A)(1) OR (A)(2)		0	N/A		TO SUPPORT A REGIONAL PLAN AND COORDINATION ON CITIZEN SECURITY BETWEEN GOVERNMENTS AND DONORS IN CENTRAL AMERICA, AND TO SUPPORT A ROLE FOR CIVIL SOCIETY GROUPS IN THIS PROCESS
WATER FIRST INTERNATIONALPO BOX 17974 SEATTLE, WA 981271954	20- 2601035	509(A)(1) OR (A)(2)	15,000	0	N/A	N/A	TO CONSTRUCT AN INTEGRATED WATER SUPPLY AND SANITATION SYSTEM, AND PROVIDE HYGIENE AND SANITARY EDUCATION FOR APPROXIMATELY 200 INDIVIDUALS LIVING IN THE TARGETED SLUM AREAS OF BANGLADESH

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
WORLD AFFAIRS COUNCIL2200 ALASKAN WAY STE 450 SEATTLE, WA 981213600	91- 0586924	509(A)(1)OR (A)(2)		0	N/A	N/A	TO SUPPORT THE 2011 PACIFIC NORTHWEST GLOBAL DONOR'S CONFERENCE
WORLD AFFAIRS COUNCIL2200 ALASKAN WAY STE 450 SEATTLE, WA 981213600	91- 0586924	509(A)(1)OR (A)(2)		0	N/A	N/A	TO PROVIDE GENERAL OPERATING SUPPORT

**Compensation Information** 

DLN: 93493319053242

OMB No 1545-0047

Open to Public

Inspection

### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization SEATTLE INTERNATIONAL FOUNDATION **Employer identification number** 

20-8350995

Par	t I Questions Regarding Compensati	ion		
			Yes	No
1a		provided any of the following to or for a person listed in Form III to provide any relevant information regarding these items		
	First-class or charter travel	Housing allowance or residence for personal use		
	Travel for companions	Payments for business use of personal residence		
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees		
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)		
b		organization follow a written policy regarding payment or scribed above? If "No," complete Part III to explain	.b	
2	•	o reimbursing or allowing expenses incurred by all ive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all			
	Independent compensation consultant	✓ Compensation survey or study		
	Form 990 of other organizations	Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990 or a related organization	D, Part VII, Section A, line 1a with respect to the filing organization		
а	Receive a severance payment or change-of-contr	rol payment?	la	No
b	Participate in, or receive payment from, a supplen	nental nonqualified retirement plan?	lb	No
c	Participate in, or receive payment from, an equity	-based compensation arrangement?	k	No
	If "Yes" to any of lines 4a-c, list the persons and	provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only (	must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a, did the organization pay or accrue any		
а	The organization?	<u>.</u>	ia	No
b	Any related organization?	<u>!</u>	ib	No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section a compensation contingent on the net earnings of	A, line 1a, did the organization pay or accrue any		
а	The organization?	(	ia	No
b	Any related organization?	(	ib	No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,	A, line 1a, did the organization provide any non-fixed " describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII subject to the initial contract exception described	I, paid or accured pursuant to a contract that was d in Regs section 53 4958-4(a)(3)? If "Yes," describe		
	in Part III		8	No
9	If "Yes" to line 8, did the organization also follows section 53 4958-6(c)?	the rebuttable presumption procedure described in Regulations		
	section 33 4330-0(c)		9	1

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

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

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

(A) Name	(B) Breakdown of  (i) Base compensation	W-2 and/or 1099-MISC compensation  (ii) Bonus & (iii) Other reportable		(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior Form 990 or
	33 in pensacion	compensation	compensation				Form 990-EZ
(1) NORMAN B RICE (I)	0 211,881	0	0 19,200	0 9,600		0 248,762	o 0
(2) MAURICIO (1) VIVERO (11)	164,196 0	0 0	0	8,375 0		184,217 0	0 0

### Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	PART I, LINE	COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD MEMBERS THEY COMPILED SALARY INFORMATION FOR THE EXECUTIVE DIRECTOR
	3	IN A SIMILAR POSITION AND DETERMINED THE AVERAGE SALARY THE BOARD OF DIRECTORS FOR SEATTLE INTERNATIONAL FOUNDATION
		APPROVED THE SALARY THE OTHER OFFICERS OF THE BOARD ARE UNCOMPENSATED BY SEATTLE INTERNATIONAL FOUNDATION

Schedule J (Form 990) 2011

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## 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

DLN: 93493319053242

2011

Open to Public Inspection

Name of the organization SEATTLE INTERNATIONAL FOUNDATION Employer identification number

20-8350995

		20-8350995
ldentifier	Return Reference	Explanation
	FORM 990, PART I, LINE 6	THERE ARE FIVE VOLUNTEER BOARD MEMBERS THAT SERVED DURING THE YEAR BOARD MEMBERS ASSIST WITH THE OPERATIONS OF THE ORGANIZATION AND GRANT OVERSIGHT
	FORM 990, PART VI, SECTION A, LINE 2	WILLIAM CLAPP AND PAULA CLAPP HAVE A FAMILY RELATIONSHIP
	FORM 990, PART VI, SECTION A, LINE 6	THERE ARE TWO CLASSES OF MEMBERS IN THE BY LAWS FOR THE ORGANIZATION THE FIRST CLASS IS DESIGNATED TO THE FOUNDATION MEMBER AND THE SECOND CLASS IS DESIGNATED TO THE DONOR MEMBER THE FOUNDATION MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE FOUNDATION DIRECTOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO THREE VOTES IN ALL VOTING MATTERS THE DONOR MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE DONOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO TWO VOTES IN ALL VOTING MATTERS
	FORM 990, PART VI, SECTION A, LINE 7A	THE FOUNDATION MEMBER IS ABLE TO ELECT THE FOUNDATION CLASS OF THE BOARD AND THE DONOR MEMBER IS ABLE TO ELECT THE DONOR CLASS OF THE BOARD
	FORM 990, PART VI, SECTION A, LINE 7B	THE DECISIONS OF THE ORGANIZATION ARE SUBJECT TO THE APPROVAL OF THE SEATTLE FOUNDATION
	FORM 990, PART VI, SECTION B, LINE 11	THE ENTIRE BOARD IS PROVIDED A COPY OF THE RETURN PRIOR TO FILING SUFFICIENT TIME IS ALLOWED FOR REVIEW AND QUESTIONS BEFORE THE RETURN IS FILED THE FOUNDATION MEMBER IS DESIGNATED TO REVIEW AND SIGN THE RETURN
	FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICIES ARE SIGNED YEARLY BY ALL BOARD MEMBERS AND TRUSTEES SEE PROCEDURES FOR COMPLIANCE BELOW A THE SUPPORTING ORGANIZATION MAINTAINS A LIST OF ALL PERSONS AND ENTITIES WHO ARE SUBSTANTIAL CONTRIBUTORS OR DISQUALIFIED PERSONS WITH RESPECT TO THE SUPPORTING ORGANIZATION THE SECRETARY OF THE SUPPORTING ORGANIZATION IS RESPONSIBLE FOR REVIEWING THESE LISTS FOR ACCURACY ON AN ANNUAL BASIS, UPDATING THE LISTS AS NEEDED, AND PROVIDING THE SEATTLE FOUNDATION WITH THESE LISTS AND ALL UPDATES B THE SUPPORTING ORGANIZATION ENSURES THAT PRIOR TO DISTRIBUTION OF ANY FUNDS, AN AGENT OF THE SUPPORTING ORGANIZATION CONFIRMS THAT THE DISTRIBUTION DOES NOT RESULT IN A PROHIBITED DISTRIBUTION UNDER THE CONFLICT OF INTEREST POLICY C ANY PAYMENT BY THE SUPPORTING ORGANIZATION TO A SUBSTANTIAL CONTRIBUTOR, RELATED PERSONS OR ENTITIES THAT IS NOT PROHIBITED BY THE CONFLICT OF INTEREST POLICY MUST BE APPROVED BY THE SEATTLE FOUNDATION'S DIRECTOR OF PHILANTHROPIC SERVICES, OR HIS OR HER DESIGNEE D THE SUPPORTING ORGANIZATION REQUIRES THAT PRIOR TO MAKING ANY PAYMENT OR PROVIDING ANY NON-INCIDENTAL BENEFIT TO A DISQUALIFIED PERSON OTHER THAN A SUBSTANTIAL CONTRIBUTOR OR RELATED PERSON OR ENTITY, SUCH PAYMENT OR BENEFIT MUST BE APPROVED BY THE SUPPORTING ORGANIZATION BOARD OF TRUSTEES AS IF SUCH DISQUALIFIED PERSON WERE A "COVERED PERSON' IN ACCORDANCE WITH THE SUPPORTING ORGANIZATION'S CONFLICT OF INTEREST POLICY
	FORM 990, PART VI, SECTION B, LINE 15A	COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD MEMBERS THEY COMPILED SALARY INFORMATION FOR THE EXECUTIVE DIRECTOR IN A SIMILAR POSITION AND DETERMINED THE AVERAGE SALARY THE BOARD OF DIRECTORS FOR SEATTLE INTERNATIONAL FOUNDATION APPROVED THE SALARY THE OTHER OFFICERS OF THE BOARD ARE UNCOMPENSATED BY SEATTLE INTERNATIONAL FOUNDATION
	FORM 990, PART VI, SECTION C, LINE 19	THE SEATTLE FOUNDATION, THE SUPPORTED ORGANIZATION, MAINTAINS COPIES OF THESE DOCUMENTS AND MAKES THEM AVAILABLE FOR INSPECTION DURING REGULAR BUSINESS HOURS AT THE SEATTLE FOUNDATION'S PRINCIPAL OFFICE. THE SEATTLE FOUNDATION ALSO COMPLIES WITH ALL REQUESTS (WRITTEN OR VERBAL) FOR COPIES OF THESE DOCUMENTS
HOURS PER WEEK DEVOTED TO A RELATED ORGANIZATION	FORM 990, PART VII, SECTION A	NORMAN B RICE 48 HOURS
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -287,902

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## **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

DLN: 93493319053242

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

Internal Revenue Service						ispectio	
Name of the organization SEATTLE INTERNATIONAL FOUNDATION				<b>Employer</b> id	dentification number		
Part I Identification of Disregarded Entities (Compl	ete ıf the organızatı	on answered "Yes"	on Form 990, P	•	<u> </u>		
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t	he tax year.)	-		<u> </u>			one g)
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu: (if section 501(c)(3)		Section 5 cont	512(b)(13) rolled nization
						Yes	No
See Additional Data Table							
For Privacy Act and Paperwork Reduction Act Notice, see the Instruction	ons for Form 990.	Cat No 50	135Y	•	Schedule R (	Form 990	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, li	ine 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)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	<b>(h)</b> Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	
									·			

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

<b>(b)</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	<b>(h)</b> Percentage ownership
	(b) Primary activity	(state or foreign	(state or entity foreign	(state or entity (C corp, S corp, foreign or trust)	(state or foreign (C corp, S corp, or trust)	(state or entity (C corp, S corp, foreign or trust)

Par	Transactions With Related Organizations (Complete if the organization answered "Yes	s" on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)		
ı	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
<b>1</b> Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organ	nizations listed in Parts	s II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b	Gift, grant, or capital contribution to related organization(s)			1b	Yes	
C	Gift, grant, or capital contribution from related organization(s)			1c	Yes	
d	Loans or loan guarantees to or for related organization(s)			1d		No
e	Loans or loan guarantees by related organization(s)			1e		No
f :	Sale of assets to related organization(s)			1f		No
g	Purchase of assets from related organization(s)			1g		No
h	Exchange of assets with related organization(s)			1h		No
i L	ease of facilities, equipment, or other assets to related organization(s)			1i		No
j l	ease of facilities, equipment, or other assets from related organization(s)			<b>1</b> j		No
k	Performance of services or membership or fundraising solicitations for related organization(s)			1k		No
I F	erformance of services or membership or fundraising solicitations by related organization(s)			11	Yes	
m :	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m		No
n	Sharing of paid employees with related organization(s)			1n		No
o	Reimbursement paid to related organization(s) for expenses			10	Yes	
p	Reimbursement paid by related organization(s) for expenses			1p		No
q	O ther transfer of cash or property to related organization(s)			<b>1</b> q		No
r (	Other transfer of cash or property from related organization(s)			1r		No
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	ncluding covered relati	onships and transact	ion thresholds		
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determin involved		ount
L)						
2)						
3)						
<b>I</b> )						
5)						
6)		1				

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

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	
				·									
							-						

Schedule R (Form 990) 2011

## Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

Form 990, Schedule R, Part II -	Identification of Re	lated Tax-	Exempt Org	ganizations	3	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	<b>(f)</b> Direct Controlling Entity	g Section 512 (b)(13) controlled organization
THE SEATTLE FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6013536	SERVES CHARITABLE ORGANIZATIONS IN THE GREATER SEATTLE AREA	WA	501(C) (3)	7	N/A	No
THE BROTMAN FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1996498	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE II	THE SEATTLE FOUNDATION	No
THE DABNEY POINT FUND  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 94-3209929	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE II	THE SEATTLE FOUNDATION	No
THE LUINO AND MARGARET DELL'OSSO FAMILY FUND  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	1111 A - I V D E I	THE SEATTLE FOUNDATION	No
91-1873773 DILLON FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2079177	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)		THE SEATTLE FOUNDATION	No
GLENHOME TRUST  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6053623	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11111-1111	THE SEATTLE FOUNDATION	No
THE GEORGE P HARDGROVE FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE I	THE SEATTLE FOUNDATION	No
91-6061389 THE KAUFFMAN FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)		THE SEATTLE FOUNDATION	N o
91-1575122  LAIRD NORTON FAMILY SUPPORTING ORGANIZATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE I	THE SEATTLE FOUNDATION	No
20-2703305  MCKIBBENMERNER FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE I	THE SEATTLE FOUNDATION	No
13-4290879 REGIS FAMILY COMMUNITY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	111A-17PF 1	THE SEATTLE FOUNDATION	No
61-1480303  ROBERTS-BECKER FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE I	THE SEATTLE FOUNDATION	No
91-2173912	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	11A-TYPE I	THE SEATTLE FOUNDATION	No
TSF PROPERTIES  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2016094	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	1111/1/06	THE SEATTLE FOUNDATION	No
TSF SERVICES  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2008707	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)		THE SEATTLE FOUNDATION	No
WALKER FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 13-4290882	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)		THE SEATTLE FOUNDATION	No
THE WHITEHORSE FOUNDATION  1200 FIFTH AVENUE SUITE 1300  SEATTLE, WA 98101  94-3101726	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)	1111/1/201	THE SEATTLE FOUNDATION	No
YOUTH OUTDOOR LEGACY FUND  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 01-0833226	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C) (3)		THE SEATTLE FOUNDATION	No

### Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

roi ili 990, Schedule K, Pa	it IV Identific	ation of ite	natea organi	izations i	axabic as a	cor por a troi	101 11430
(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
SRF CHARITABLE TRUST 800 FIFTH AVE SEATTLE, WA 981043176 91-6059260	MANAGE INVESTMENTS	WA	N/A	Т			
REF TRUST FBO THE SEATTLE FOUNDATION 1301 FIFTH AVE FLR 24 SEATTLE, WA 98101 91-6027079	MANAGE INVESTMENTS	WA	N/A	Т			
1301 FIFTH AVE FLR 24 SEATTLE, WA 98101 91-6027080	MANAGE INVESTMENTS	WA	N/A	Т			
DMH CHARITABLE TRUST FBO SEATTLE FOUNDATION 999 THIRD AVE STE 4000 SEATTLE, WA 98104 91-6023538	MANAGE INVESTMENTS	WA	N/A	Т			
HP CHARITABLE TRUST FBO THE SEATTLE FOUNDATION 999 THIRD AVE STE 4000 SEATTLE, WA 98104 91-6023566	MANAGE INVESTMENTS	WA	N/A	Т			
800 FIFTH AVE SEATTLE, WA 981043176 91-6300139	MANAGE INVESTMENTS	WA	N/A	Т			
	MANAGE INVESTMENTS	WA	N/A	Т			
CHARITABLE REMAINDER TRUSTS (18) 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	MANAGE INVESTMENTS	WA	N/A	Т			

### **Additional Data**

Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

## Form 990, Special Condition Description:

**Special Condition Description**