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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	<div> <div>2012</div> <div>Open to Public Inspection</div> </div>

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY		D Employer identification number 91-0482890	
	Doing Business As YWCA SEATTLEKINGSNOHOMISH			
	Number and street (or P O box if mail is not delivered to street address) 1118 FIFTH AVENUE		Room/suite	E Telephone number
	City or town, state or country, and ZIP + 4 SEATTLE, WA 98101			(206) 490-4380
				G Gross receipts \$ 37,786,615
F Name and address of principal officer SUE SHERBROOKE 1118 FIFTH AVENUE SEATTLE, WA 98101		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.YWCAWORKS.ORG				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation 1894	M State of legal domicile WA

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities EMPOWER WOMEN BY ATTACKING HOMELESSNESS, DOMESTIC VIOLENCE, UNEMPLOYMENT, RACISM, & POVERTY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	44
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	44
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	854
	6 Total number of volunteers (estimate if necessary)	6	2,879
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	32,963,270	29,918,317
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,403,745	4,800,266
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,688,030	1,019,604
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,519,869	-77,160
		40,574,914	35,661,027
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,826,276	6,818,228
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	17,159,462	17,119,831
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>1,273,599</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	10,823,709	11,694,262
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	34,809,447	35,632,321
	19 Revenue less expenses Subtract line 18 from line 12	5,765,467	28,706
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	149,791,170	150,833,784
	21 Total liabilities (Part X, line 26)	76,047,954	74,063,941
	22 Net assets or fund balances Subtract line 21 from line 20	73,743,216	76,769,843

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	*****				2013-08-21		
	Signature of officer				Date		
	SUE SHERBROOKE CHIEF EXECUTIVE OFFICER						
	Type or print name and title						
Paid Preparer Use Only	Print/Type preparer's name SARA ELIZABETH J HYRE		Preparer's signature		Date 2013-08-26	Check <input type="checkbox"/> if self-employed	PTIN P00235495
	Firm's name ▶ CLARK NUBER PS					Firm's EIN ▶ 91-1194016	
	Firm's address ▶ 10900 NE 4TH STREET SUITE 1700 BELLEVUE, WA 98004					Phone no (425) 454-4919	

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

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

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

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 19,146,941 including grants of \$ 4,177,686) (Revenue \$ 3,814,878)

SAFE, STABLE HOUSING DAY CENTERS FOR HOMELESS WOMEN, TIME-LIMITED AND PERMANENT HOUSING, PRIMARILY FOR LOW AND VERY LOW INCOME WOMEN AND FAMILIES, CASE MANAGEMENT, HOUSING PLACEMENT SERVICES, EVICTION PREVENTION, 24-HOUR FRONT DESK AND SECURITY SERVICES, AND INFORMATION/REFERRAL 11,330 PERSONS, INCLUDING 3,902 CHILDREN, WERE SERVED IN 2012 THE YWCA OWNS 885 APARTMENT UNITS AND OPERATES OR PROVIDES SERVICES AT AN ADDITIONAL 235 UNITS

4b

(Code) (Expenses \$ 4,562,060 including grants of \$ 428,196) (Revenue \$ 64,444)

ECONOMIC EMPOWERMENT INDIVIDUAL AND GROUP JOB SEARCH COUNSELING, PLACEMENT ASSISTANCE, FOLLOW-UP SUPPORT, CASE MANAGEMENT, TUITION ASSISTANCE, AND ASSISTANCE WITH FOOD, CLOTHING, HOUSING, AND ACCESS TO HEALTH CARE IN 2012 THE YWCA PROVIDED ONGOING SERVICES TO 7,647 PEOPLE ALMOST 19,000 OTHERS RECEIVED WORK-RELATED CLOTHING OR SERVICES AT A CAREER DEVELOPMENT CENTER

4c

(Code) (Expenses \$ 5,960,098 including grants of \$ 1,993,444) (Revenue \$ 343,170)

SUCCESS IN LIFE DEVELOPMENTAL CHILD CARE FOR TODDLERS THROUGH SCHOOL AGE CHILDREN, MOST OF WHOM ARE BELOW MEDIAN INCOME AND RECEIVE SUBSIDIZED CHILD CARE, AFTER-SCHOOL AND SUMMER PROGRAM AIMED AT SKILL-BUILDING AND MENTORING FOR AT-RISK GIRLS IN MIDDLE AND HIGH SCHOOL, COUNSELING AND COPING FOR CHILDREN WHO HAVE BEEN EXPOSED TO DOMESTIC VIOLENCE 1,105 CHILDREN AND YOUTH RECIEVED ONGOING SERVICES IN 2012 ALSO, OVER 4,000 CHILDREN RECEIVED GIFTS THROUGH THE ADOPT-A-FAMILY AND SCHOOL DAYS PROGRAM

(Code) (Expenses \$ 2,506,955 including grants of \$ 218,902) (Revenue \$ 577,774)

LIVE IN DIGNITY COUNSELING FOR WOMEN RECOVERING FROM DOMESTIC VIOLENCE, AND EDUCATIONAL OUTREACH IN THE COMMUNITY REGARDING DOMESTIC VIOLENCE, ASSESSMENT, EDUCATION, AND ADVOCACY FOR CLIENTS NEEDING ACCESS TO HEALTH CARE, VETERANS SUPPORT SERVICES, VOLUNTEER SERVICES, RACIAL EQUITY AND SOCIAL JUSTICE WORK BOTH INTERNAL AND EXTERNAL TO THE ORGANIZATION OVER 12,000 PERSONS WERE SERVED IN 2012, WITH 4,804 RECEIVING ON-GOING SERVICES

4d

Other program services (Describe in Schedule O)






















(Expenses \$ 2,506,955 including grants of \$ 218,902) (Revenue \$ 577,774)

4e

Total program service expenses

32,176,054

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	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 I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
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 V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	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 and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	248	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	854	
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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
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 Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	44	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	44	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	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		No
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			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	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 this 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	
c	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," 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	Yes	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	KRIS LAMBRIGHT 1118 FIFTH AVENUE SEATTLE, WA (206) 490-4380

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

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

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

[illegible]

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	361,886	0	47,101

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. **3**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
WALSH CONSTRUCTION CO 2905 SW FIRST AVE PORTLAND OR 97201	CONSTRUCTION SERVICES	573,256
SYNERGY CONSTRUCTION CO 14040 NE 181ST ST WOODINVILLE WA 98072	CONSTRUCTION SERVICES	349,667
CONTINUANT INC PO BOX 110966 TACOMA WA 98411	TELECOMMUNICATION SERVICES	182,370
ABM JANITORIAL SERVICES - NORTHWEST INC PO BOX 742049 LOS ANGELES CA 90074	JANITORIAL SERVICES	165,910
GUARDSMARK LLC FILE 6498 LOS ANGELES CA 90074	SECURITY SERVICES	133,646

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►8

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a	1,819,324				
	b	Membership dues	1b					
	c	Fundraising events	1c	1,727,174				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	18,358,127				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,013,692				
	g	Noncash contributions included in lines 1a-1f \$		1,108,783				
	h	Total. Add lines 1a-1f						29,918,317
Program Service Revenue			Business Code					
	2a	SAFE, STABLE HOUSING	531110	3,814,878	3,814,878			
	b	LIVE WITH DIGNITY	900099	577,774	577,774			
	c	SUCCESS IN LIFE	624100	343,170	343,170			
	d	ECONOMIC EMPOWERMENT	561311	64,444	64,444			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			4,800,266			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		879,594			879,594	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
		209,732						
		27,191						
		182,541						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)		182,541			182,541	
	7a	(i) Securities		(ii) Other				
		1,832,887		150				
		1,693,027		0				
		139,860		150				
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)		140,010			140,010	
	8a	Gross income from fundraising events (not including \$ 1,727,174 of contributions reported on line 1c) See Part IV, line 18		139,245				
	a							
	b	Less direct expenses						
	b	Less direct expenses		405,370				
	c	Net income or (loss) from fundraising events . .		-266,125			-266,125	
9a	Gross income from gaming activities See Part IV, line 19		6,424					
a								
b	Less direct expenses							
b	Less direct expenses		0					
c	Net income or (loss) from gaming activities . .		6,424			6,424		
10a	Gross sales of inventory, less returns and allowances							
a								
b	Less cost of goods sold							
b	Less cost of goods sold							
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue			Business Code					
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			35,661,027	4,800,266	0	942,444	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	2,175,246	2,175,246		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	4,642,982	4,642,982		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	266,561		266,561	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	13,509,159	11,753,249	980,573	775,337
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	876,409	760,674	74,929	40,806
9	Other employee benefits.	1,178,502	1,050,401	67,028	61,073
10	Payroll taxes.	1,289,200	1,116,421	95,748	77,031
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	59,703	33,489	26,127	87
c	Accounting.	131,905	18,499	113,406	
d	Lobbying.	4,000	4,000		
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	631,270	603,559	20,574	7,137
12	Advertising and promotion.	38,174	16,868	20,224	1,082
13	Office expenses.	1,386,169	1,192,852	108,990	84,327
14	Information technology.				
15	Royalties.				
16	Occupancy.	3,175,293	3,124,084	35,351	15,858
17	Travel.	355,195	318,986	28,014	8,195
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	83,676	64,086	13,449	6,141
20	Interest.	1,876,404	1,876,404		
21	Payments to affiliates.	20,000		20,000	
22	Depreciation, depletion, and amortization.	2,615,553	2,487,339	97,502	30,712
23	Insurance.	410,198	339,142	58,404	12,652
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	IN-KIND	530,337	365,503	100,771	64,063
b	LICENSES, PERMITS & FEES	213,676	146,700	23,730	43,246
c	MISCELLANEOUS	117,691	65,653	6,566	45,472
d	DUES	45,018	19,917	24,721	380
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	35,632,321	32,176,054	2,182,668	1,273,599
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		3,441,782	1	3,320,105
	2	Savings and temporary cash investments		5,121,260	2	5,879,548
	3	Pledges and grants receivable, net		5,977,444	3	5,405,886
	4	Accounts receivable, net		3,974,169	4	3,047,364
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		13,147,308	7	13,967,438
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		758,857	9	908,875
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a106,335,037			
	b	Less accumulated depreciation	10b15,905,072	92,678,205	10c	90,429,965
	11	Investments—publicly traded securities		22,769,907	11	24,634,035
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		0	13	1,397,165
	14	Intangible assets		1,271,425	14	1,171,544
	15	Other assets See Part IV, line 11		650,813	15	671,859
	16	Total assets. Add lines 1 through 15 (must equal line 34)		149,791,170	16	150,833,784
Liabilities	17	Accounts payable and accrued expenses		3,954,274	17	3,253,512
	18	Grants payable			18	
	19	Deferred revenue		44,423	19	24,292
	20	Tax-exempt bond liabilities		37,534,463	20	36,336,158
	21	Escrow or custodial account liability Complete Part IV of Schedule D		321,456	21	335,547
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		33,958,263	23	33,893,643
	24	Unsecured notes and loans payable to unrelated third parties		20,790	24	20,790
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		214,285	25	199,999
	26	Total liabilities. Add lines 17 through 25		76,047,954	26	74,063,941
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		41,965,289	27	44,285,658
	28	Temporarily restricted net assets		25,061,478	28	25,438,628
	29	Permanently restricted net assets		6,716,449	29	7,045,557
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		73,743,216	33	76,769,843
	34	Total liabilities and net assets/fund balances		149,791,170	34	150,833,784

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,661,027
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,632,321
3	Revenue less expenses Subtract line 2 from line 1	3	28,706
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,743,216
5	Net unrealized gains (losses) on investments	5	1,780,532
6	Donated services and use of facilities	6	-179,776
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,397,165
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	76,769,843

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

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

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

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

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	<input type="checkbox"/>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	<input type="checkbox"/>	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h <div>a <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III - Functionally integrated d <input type="checkbox"/> Type III - Non-functionally integrated</div>
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? <div>(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?</div>
h	<input type="checkbox"/>	Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	23,847,029	32,992,147	33,920,278	32,963,270	29,918,317	153,641,041
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	23,847,029	32,992,147	33,920,278	32,963,270	29,918,317	153,641,041
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						790,556
6 Public support. Subtract line 5 from line 4						152,850,485

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	23,847,029	32,992,147	33,920,278	32,963,270	29,918,317	153,641,041
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,261,710	866,718	1,026,915	1,131,214	1,089,326	5,375,883
9 Net income from unrelated business activities, whether or not the business is regularly carried on	13,556	10,200				23,756
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				330,251		330,251
11 Total support (Add lines 7 through 10)						159,370,931
12 Gross receipts from related activities, etc. (see instructions)					12	22,644,334
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here. ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	95.910 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	95.200 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

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

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME INSURANCE PROCEEDS - 2011 AMOUNT \$ 330,251

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

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

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

If the organization answered “Yes” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

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

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

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

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

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

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

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

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

Part II-A

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

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

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

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	a Volunteers?	Yes		
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
	c Media advertisements?		No	
	d Mailings to members, legislators, or the public?		No	
	e Publications, or published or broadcast statements?		No	
	f Grants to other organizations for lobbying purposes?		No	
	g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
	i Other activities?		No	
	j Total Add lines 1c through 1i			121,860
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	SENIOR PROGRAM STAFF COMMUNICATE WITH GOVERNMENT FUNDERS ON AN ONGOING BASIS TO EDUCATE THEM ON THE NEED FOR FUNDING YWCA PROGRAMS AND OTHER SERVICES AND POLICIES THAT BENEFIT YWCA CLIENTS. THIS INCLUDES TESTIFYING AT COUNCIL MEETINGS AND ATTENDING MEETINGS WITH LEGISLATORS AND THEIR STAFF. A VERY SMALL AMOUNT IS ALSO PAID TO A LOBBYIST (\$4,000 PER YEAR).

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

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

Employer identification number

91-0482890

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

Number of states where property subject to conservation easement is located ▶_____

5

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

☐ Yes☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶_____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

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

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☒

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	17,861,344	18,000,115	15,515,275	17,257,480	22,619,785
b Contributions	329,108	277,860	1,108,089	127,417	96,149
c Net investment earnings, gains, and losses	1,986,086	314,369	2,047,751	3,416,307	-4,791,454
d Grants or scholarships	780,000				
e Other expenditures for facilities and programs		731,000	671,000	5,285,929	667,000
f Administrative expenses					
g End of year balance	19,396,538	17,861,344	18,000,115	15,515,275	17,257,480

2

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

a

Board designated or quasi-endowment

0 %

b

Permanent endowment

36 320 %

c

Temporarily restricted endowment

63 680 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

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

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		16,066,367		16,066,367
b Buildings		85,434,229	12,538,003	72,896,226
c Leasehold improvements				
d Equipment		4,834,441	3,367,069	1,467,372
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				90,429,965

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	40,701,717
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	1,780,532
b	Donated services and use of facilities	2b	247,066
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	2,609,775
e	Add lines 2a through 2d	2e	4,637,373
3	Subtract line 2e from line 1	3	36,064,344
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-403,317
c	Add lines 4a and 4b	4c	-403,317
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	35,661,027

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	39,372,223
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	426,842
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	3,313,060
e	Add lines 2a through 2d	2e	3,739,902
3	Subtract line 2e from line 1	3	35,632,321
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	35,632,321

Part XIII

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	THE ORGANIZATION HAS BEEN CONTRACTED TO ACT AS THE FISCAL AGENT FOR THE NORTHWEST REGIONAL COUNCIL OF THE YWCA. AS FISCAL AGENT, THE ORGANIZATION COLLECTS DUES FROM THE REGION'S ASSOCIATIONS AND ALSO PAYS THE REGION'S EXPENSES. AS OF DECEMBER 31, 2012, THERE WAS \$11,700 AND \$323,847 HELD IN RESTRICTED CASH AND INVESTMENTS, RESPECTIVELY, FOR A TOTAL OF \$335,547 HELD ON BEHALF OF THE REGION.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	YWCA ENDOWMENT FUNDS EXIST TO PROVIDE RELIABLE ONGOING SUPPORT FOR THE WORK OF THE YWCA. TO THIS END, THE YWCA INVESTS IN HIGH QUALITY MUTUAL AND EXCHANGE-TRADED FUNDS. THE YWCA HAS ADOPTED AN INVESTMENT POLICY THAT IS INTENDED TO PROVIDE THE YWCA'S INVESTMENT COMMITTEE WITH OBJECTIVES AND GUIDELINES FOR THE MANAGEMENT OF PRINCIPAL AND ACCUMULATED EARNINGS IN ALL YWCA ENDOWMENT FUNDS. THE INVESTMENT OBJECTIVES ARE TO GENERATE A RELIABLE PAYOUT TO SUPPORT PROGRAMS, GROW PRINCIPAL TO HELP OFFSET INFLATION, AND TAKE THE MINIMUM AMOUNT OF RISK TO PRINCIPAL NECESSARY TO MEET THE STATED PERFORMANCE OBJECTIVE. THE INVESTMENT COMMITTEE MEETS QUARTERLY TO MONITOR COMPLIANCE WITH THE INVESTMENT POLICY AND TO REVIEW PERFORMANCE. PERFORMANCE OBJECTIVE: OVER A MARKET CYCLE, IN ORDER TO ENSURE THE CONTINUED PURCHASING POWER OF THE FUND, THE FUND WILL BE EXPECTED TO RETURN AT LEAST THE NOMINAL PAYOUT PERCENTAGE (DEFINED AS THE ACTUAL PAYOUT AMOUNT AS A PERCENTAGE OF THE CURRENT MARKET VALUE OF THE FUND) ON THE CURRENT MARKET VALUE PLUS THE RATE OF INFLATION PER ANNUM.
PART XI, LINE 2D - OTHER ADJUSTMENTS		REVENUE FROM AFFILIATES INCLUDED ON THE CONSOLIDATED FINANCIAL STATEMENTS 1,746,016 NONCONTROLLING INTEREST IN NET LOSSES OF SUBSIDIARIES 877,252 GRANT TO DRESS FOR SUCCESS -13,493
PART XI, LINE 4B - OTHER ADJUSTMENTS		SPECIAL EVENTS EXPENSE -376,126 RENTAL EXPENSE -27,191
PART XII, LINE 2D - OTHER ADJUSTMENTS		EXPENSES FROM AFFILIATES 2,923,236 INCLUDED ON THE CONSOLIDATED FINANCIAL STATEMENTS SPECIAL EVENTS EXPENSE 376,126 RENTAL EXPENSE 27,191 GRANT TO DRESS FOR SUCCESS -13,493

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
		<u>SEATTLE LUNCHEON</u> (event type)	<u>EASTSIDE LUNCHEON</u> (event type)	<u>4</u> (total number)	(add col (a) through col (c))		
Revenue	1	Gross receipts	1,066,783	576,088	223,548	1,866,419	
	2	Less Contributions . . .	1,001,183	540,184	185,807	1,727,174	
	3	Gross income (line 1 minus line 2)	65,600	35,904	37,741	139,245	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .					
	6	Rent/facility costs . . .	13,515	6,197	4,867	24,579	
	7	Food and beverages .	65,506	36,026	31,021	132,553	
	8	Entertainment	22,801	37,070	22,618	82,489	
	9	Other direct expenses .	58,153	47,348	60,248	165,749	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(405,370)
	11	Net income summary Combine line 3, column (d), and line 10 ▶					-266,125

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

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

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

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

b If "No," explain _____

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

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

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

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

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

Employer identification number
91-0482890

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

24

3

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

1

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

Part IV Supplemental Information.		
Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information		
Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 EACH PROGRAM THAT ISSUES GRANT FUNDS HAS A SYSTEM IN PLACE TO MONITOR THEM THE PROCEDURES DIFFER DEPENDING ON THE TYPE OF GRANT AND ITS FUNDING SOURCE COMMON ELEMENTS INCLUDE REQUIRING AN INVOICE AND/OR OTHER BACK-UP FOR EACH GRANT DISTRIBUTION, PLUS THE SUBMISSION OF REQUIRED REPORTS

Additional Data

Return to Form

Software ID:

Software Version:

EIN: 91-0482890

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABUSED DEATH WOMEN'S ADVOCACY SERVICES 8623 ROOSEVELT WAY NE SEATTLE,WA 98115	91-1339173	501(C)(3)	13,624				VIOLENCE AGAINST WOMEN FORMULA (STOP) GRANT
ASIAN & PACIFIC ISLANDER WOMEN & FAMILY SAFETY CENTERPO BOX 14047 SEATTLE,WA 98114	91-1674016	501(C)(3)	11,132				VIOLENCE AGAINST WOMEN FORMULA (STOP) GRANT
CHILDREN'S ALLIANCE718 6TH AVE SOUTH SEATTLE,WA 98104	91-0982879	501(C)(3)	11,678				WASHINGTON AFTERSCHOOL NETWORK
CHURCH COUNCIL OF GREATER SEATTLE (CCGS) 4759 15TH AVE NE 3RD FLOOR SEATTLE,WA 98105	91-0460490	501(C)(3)	8,000				SOUTH YOUTH VISTA
CITY OF SEATTLE DEPARTMENT OF PARKS AND RECREATION800 MAYNARD AVE 3RD FLOOR SEATTLE,WA 98104	91-6001275	GOVERNMENT AGENCY	63,579				TITLE V-SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM
DRESS FOR SUCCESS SEATTLE1118 FIFTH AVENUE SEATTLE,WA 98101	91-1925352	501(C)(3)	13,493				EMPLOYMENT SERVICES PROGRAM
FEDERAL WAY SCHOOL DISTRICT1714 334TH LANE S D102 FEDERAL WAY,WA 98003	91-6001624	SCHOOL DISTRICT	16,302				REFUGEE SCHOOL IMPACT GRANT , WAKIDS GRANT
GRAND COULEE DAM SCHOOL DISTRICT110 STEVENS AVE COULEE DAM,WA 99116	91-0919162	SCHOOL DISTRICT	5,144				FEED YOUR BRAIN GRANT
HIGHLINE PUBLIC SCHOOLS15675 AMBAUM BLVD SW BURIEN,WA 98166	91-6001631	SCHOOL DISTRICT	15,000				REFUGEE SCHOOL IMPACT GRANT
KENNEWICK SCHOOL DISTRICT524 S AUBURN ST KENNEWICK,WA 99336	91-6001557	SCHOOL DISTRICT	21,375				REFUGEE SCHOOL IMPACT GRANTS
KENT SCHOOL DISTRICT 12033 SE 256 STREET KENT,WA 98030	91-6001646	SCHOOL DISTRICT	131,135				REFUGEE SCHOOL IMPACT GRANT , WAKIDS GRANT
MULTI SERVICE CENTER 1200 S 336TH STREET FEDERAL WAY,WA 98093	23-7120815	501(C)(3)	13,876				SUPPORTIVE HOUSING PROGRAM
OPERATION NIGHTWATCH PO BOX 21181 SEATTLE,WA 98111	91-0964027	501(C)(3)	9,982				EMERGENCY FOOD AND SHELTER PROGRAM
REFUGEE WOMEN'S ALLIANCE4008 MARTIN LUTHER KING JR WAY S SEATTLE,WA 98108	91-1296964	501(C)(3)	13,874				VIOLENCE AGAINST WOMEN FORMULA (STOP) GRANT, BRIDGE STIPEND
RENTON SCHOOL DISTRICT300 SW 7TH STREET RENTON,WA 98057	91-6001635	SCHOOL DISTRICT	22,000				REFUGEE SCHOOL IMPACT GRANT
SEATTLE INDIAN HEALTH BOARDPO BOX 3364 SEATTLE,WA 98114	91-0869056	501(C)(3)	11,589				VIOLENCE AGAINST WOMEN FORMULA (STOP) GRANT
SEATTLE PUBLIC SCHOOLSPO BOX 34165 SEATTLE,WA 98124	91-6001541	SCHOOL DISTRICT	110,729				REFUGEE SCHOOL IMPACT GRANT
SPOKANE PUBLIC SCHOOLS200 N BERNARD SPOKANE,WA 99201	91-6001582	SCHOOL DISTRICT	121,037				REFUGEE SCHOOL IMPACT GRANT , WASHINGTON REGIONAL AFTERSCHOOL PROJECT
TACOMA SCHOOL DISTRICTPO BOX 1357 TACOMA,WA 98401	91-6001553	SCHOOL DISTRICT	22,000				REFUGEE SCHOOL IMPACT GRANT
TRAC ASSOCIATES1001 BROADWAY SUITE 217 SEATTLE,WA 98122	91-1247183		56,621				COMMUNITY JOBS (TEMPORARY ASSISTANCE FOR NEEDY FAMILIES) GRANT
TUKWILA SCHOOL DISTRICT4640 S 144TH ST TUKWILA,WA 98168	91-6001638	SCHOOL DISTRICT	131,250				REFUGEE SCHOOL IMPACT GRANT
VANCOUVER SCHOOL DISTRICTPO BOX 8937 VANCOUVER,WA 98668	91-6001540	SCHOOL DISTRICT	14,625				REFUGEE SCHOOL IMPACT GRANT
VOLUNTEERS OF AMERICA PO BOX 839 EVERETT,WA 98206	91-0577129	501(C)(3)	65,988				WASHINGTON REGIONAL AFTERSCHOOL PROJECT
WASHINGTON STATE UNIVERSITYPO BOX 641025 PULLMAN,WA 99164	91-6001108	UNIVERSITY	196,275				WASHINGTON REGIONAL AFTERSCHOOL PROJECT
SCHOOL'S OUT WASHINGTON801 23RD AVENUE S SUITE A SEATTLE,WA 98144	46-0809713	501(C)(3)		934,108	BOOK VALUE	ASSETS AND LIABILITIES	TRANSFER OF NET ASSETS FROM YWCA TO SEPARATE ENTITY CREATED

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
UTILITY ASSISTANCE	1228		178,801	FMV	UTILITY BILLS
SHELTER/RENT ASSISTANCE	5873		3,895,769	FMV	HOUSING
TRANSPORTATION ASSISTANCE	2734		187,746	FMV	BUS PASSES, TICKETS, ETC
CHILDCARE ASSISTANCE	44		126,190	FMV	CHILDCARE
FOOD ASSISTANCE	34		2,758	FMV	GROCERIES, ETC
CASH ASSISTANCE (INCENTIVES, AWARDS, CREDIT REPAIR)	2625	74,965			
TRAINING - TUITION ASSISTANCE	159		59,710	FMV	TRAINING, EDUCATION, ETC
CLOTHING ASSISTANCE	123		18,899	FMV	CLOTHING
MEDICAL ASSISTANCE	61		20,196	FMV	MEDICINE, OUTPATIENT COSTS, ETC
LICENSE & PERMIT ASSISTANCE	62		3,788	FMV	LICENSE RENEWALS, BIRTH CERTIFICATE, FOOD HANDLERS PERMIT, ETC
SUPPLIES ASSISTANCE (HOUSEHOLD, JOB, SCHOOL)	8921		59,179	FMV	HOUSEHOLD RELATED, JOB-RELATED, SCHOOL, TOYS, ETC
FURNITURE ASSISTANCE	11		14,981	FMV	BED, MATTRESS, TABLES, CHAIRS, ETC

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

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

Employer identification number
91-0482890

Part I

Bond Issues

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

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	585,000		1,070,000					
2	Amount of bonds legally defeased								
3	Total proceeds of issue	3,655,000		13,760,000		15,040,000		5,700,000	
4	Gross proceeds in reserve funds	1,184,323		1,184,323		75,858			
5	Capitalized interest from proceeds	8,928						8,928	
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	257,147		257,147		318,853		24,250	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	3,655,000		12,991,340		14,217,332		5,624,675	
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2005		2007		2007		2011	
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
			X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 00000%		0 00000%		0 00000%		0 00000%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 00000%		0 00000%		0 00000%		0 00000%	
6	Total of lines 4 and 5	0 00000%		0 00000%		0 00000%		0 00000%	
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		X
b	Exception to rebate?		X		X		X		X
c	No rebate due?		X		X		X		X
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?	X			X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	NA		NA		NA			
c	Term of hedge								
d	Was the hedge superintegrated?		X		X		X		X
e	Was a hedge terminated?		X		X		X		X

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b	Name of provider	NA		NA		NA		NA	
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X		X		X		X
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		X

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

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

Employer identification number
91-0482890

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	44	516,773	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>EVENT</u> ITEMS)	X	7	70,063	FAIR MARKET VALUE
26 Other ► (<u>PROGRAM</u> SUPPLIES)	X	5	23,429	FAIR MARKET VALUE
27 Other ► (<u>AUCTION</u> ITEMS)	X	145	29,244	FAIR MARKET VALUE
28 Other ► (<u>SOFTWARE</u>)	X	1	469,274	FAIR MARKET VALUE

29

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

29

0

30a

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

30a

Yes

No

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

No

32a

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

32a

No

b

If "Yes," describe in Part II

33

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

Part II

Supplemental Information.

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	YWCA REPORTED INFORMATION BASED ON THE NUMBER OF CONTRIBUTIONS RECEIVED IN COLUMN (B) ABOVE

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

2012

Open to Public
Inspection

Name of the organization YOUNG WOMENS CHRISTIAN ASSOCIATION OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Employer identification number 91-0482890
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Identifier	Return Reference	Explanation
	FORM 990, PART I, LINE 6	2,879 VOLUNTEERS ASSIST IN HELPING BOTH PROGRAM STAFF AND ADMINISTRATION OF THESE, 47 VOLUNTEERS REPRESENT THE BOARD MEMBERS OF THE ORGANIZATION VOLUNTEER INFORMATION IS ENTERED INTO A DATABASE BY THE VOLUNTEERS THEMSELVES WHEN VOLUNTEERS SIGN UP FOR A VOLUNTEER OPPORTUNITY, BE IT A ONE-TIME OR LONG-TERM, THEY REGISTER ONLINE, COMPLETE A PROFILE, AND ARE AUTOMATICALLY ENTERED INTO YWCA'S DATABASE THEN, VOLUNTEER SERVICES STAFF MONITOR THE DATABASE AND MARK VOLUNTEERS AS ACTIVE OR INACTIVE, DEPENDING ON THEIR STATUS OVER TIME

Identifier	Return Reference	Explanation
	FORM 990, PART V, LINE 2A	THE YWCA FILED 854 W-2S FOR 2012. A LARGE NUMBER OF THESE WERE FOR INTERNS THAT ARE PAID THROUGH THE YWCA PAYROLL SYSTEM BUT ARE PART OF A STATE EMPLOYMENT CONTRACT. THE INTERNS WORK MAINLY AT NON-YWCA LOCATIONS. THE TOTAL BUDGETED YWCA STAFF FOR 2012 WAS APPROXIMATELY 309 FULL TIME EMPLOYEES.

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

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

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

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

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THERE IS A FORMAL ANNUAL REVIEW PROCESS FOR THE AGENCY'S CHIEF EXECUTIVE OFFICER. A SUBCOMMITTEE OF THE BOARD PERFORMS THE REVIEW. THIS PROCESS WAS LAST COMPLETED IN APRIL 2013. THE COMMITTEE RECOMMENDS THE COMPENSATION OF THE CEO TO THE BOARD. COMPENSATION IS COMPARED TO THE AGENCY COMPENSATION PLAN. THE PAY RANGES IN THE COMPENSATION PLAN ARE BASED ON A REVIEW OF SEVERAL COMPENSATION STUDIES. THE SALARY COMPARISONS ARE MADE TO SIMILAR-SIZED (BUDGET, NUMBER OF STAFF) ORGANIZATIONS IN THE NON-PROFIT HUMAN SERVICES FIELD IN THE STATE OF WASHINGTON. THERE IS ALSO A FORMAL ANNUAL REVIEW DONE BY THE CEO ON ALL OTHER OFFICERS AND KEY EMPLOYEES. THIS PROCESS WAS LAST PERFORMED IN SUMMER 2012. COMPENSATION IS COMPARED TO THE AGENCY COMPENSATION PLAN. THE PAY RANGES IN THE COMPENSATION PLAN ARE BASED ON A REVIEW OF SEVERAL COMPENSATION STUDIES. THE SALARY COMPARISONS ARE MADE TO SIMILAR-SIZED (BUDGET, NUMBER OF STAFF) ORGANIZATIONS IN THE NON-PROFIT HUMAN SERVICES FIELD IN THE STATE OF WASHINGTON.

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

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

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	PRIOR PERIOD CORRECTIONS FOR TRANSACTIONS WITH RELATED ORGANIZATIONS 1,397,165

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

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

Employer identification number

91-0482890

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1344937	TO HOLD AFFORDABLE HOUSING	WA	501(C)(3)	9 - 509(A)(2)	YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Yes	
(2) DRESS FOR SUCCESS SEATTLE 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1925352	SOCIAL SERVICES/EMPLOYMENT SERVICES	WA	501(C)(3)	7 - 509(A)(1)	YWCA OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY	Yes	

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ANGELINE'S LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-2123444	AFFORDABLE HOUSING	WA	YWCA OF SEATTLE-KING COUNTY- SNOHOMISH COUNTY	RELATED	88,016	3,750,409		No		Yes		0 010 %
(2) YWCA FAMILY VILLAGE AT ISSAQUAH II LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	YWCA OF SEATTLE-KING COUNTY- SNOHOMISH COUNTY	RELATED	-57	9,569,871		No		Yes		0 010 %

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

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

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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

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

k

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

l

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

m

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

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

Yes

1b

Yes

1c

No

1d

Yes

1e

Yes

1f

No

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

Yes

1r

No

1s

No

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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

[illegible]

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Software ID:
Software Version:
EIN: 91-0482890
Name: YOUNG WOMENS CHRISTIAN ASSOCIATION
OF SEATTLE-KING COUNTY-SNOHOMISH COUNTY

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

(a) Name, address, and EIN of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(1) SUMMERFIELD HOUSING LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	567,003	4,771,944	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(2) YW HOME NOW LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	298,450	11,607,930	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(3) YW AHF MOUNTLAKE TERRACE LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	595,430	6,053,148	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(4) YW AHF LYNNWOOD LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	862,936	10,525,425	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(5) YW AHF EVERETT LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	1,037,925	9,285,207	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(6) YWCA GREENBRIDGE LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	TO HOLD THE YWCA LEARNING CENTER	WA	185,023	4,935,126	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(7) YWCA FAMILY VILLAGE AT ISSAQUAH I LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-0482890	AFFORDABLE HOUSING	WA	126,361	25,796,810	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY
(8) YWCA FAMILY VILLAGE AT REDMOND LLC 1118 FIFTH AVENUE SEATTLE, WA 98101 91-1579120	AFFORDABLE HOUSING	WA	245,978	2,712,257	YOUNG WOMEN'S SERVICE ASSOCIATION OF SEATTLE-KING COUNTY

Additional Data

Software ID:

Software Version:

EIN: 91-0482890

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LESLIE D JONES BOARD CHAIR	2 00 1 00	X		X				0	0	0
ELLEN CONEDERA DIAL BOARD CHAIR ELECT	2 00 1 00	X		X				0	0	0
KRIS WILSON SECRETARY	2 00 1 00	X		X				0	0	0
MARY E SNAPP TREASURER	2 00 1 00	X		X				0	0	0
JEAN BARTELL BARBER BOARD MEMBER	1 00 1 00	X						0	0	0
CHARLENE BLETHEN BOARD MEMBER	1 00 1 00	X						0	0	0
MARTHA MAYES BOES BOARD MEMBER	1 00 1 00	X						0	0	0
BOBBE BRIDGE BOARD MEMBER	1 00 1 00	X						0	0	0
SONYA CAMPION BOARD MEMBER	1 00 1 00	X						0	0	0
BLAIR CARLETON BOARD MEMBER	1 00 1 00	X						0	0	0
CHERYL CHOW BOARD MEMBER	1 00 1 00	X						0	0	0
PAUL CHILES BOARD MEMBER	1 00 1 00	X						0	0	0
ROBYN CORR BOARD MEMBER	1 00 1 00	X						0	0	0
MARYANN CRISSEY BOARD MEMBER	1 00 1 00	X						0	0	0
WHITNEY CURRY BOARD MEMBER	1 00 1 00	X						0	0	0
PAM DANIELS BOARD MEMBER	1 00 1 00	X						0	0	0
IRME DORE BOARD MEMBER	1 00 1 00	X						0	0	0
JEAN ENERSEN BOARD MEMBER	1 00 1 00	X						0	0	0
MARY ANNE ENG BOARD MEMBER	1 00 1 00	X						0	0	0
BARBARA FAHEY BOARD MEMBER	1 00 1 00	X						0	0	0
MOLLY HANLON BOARD MEMBER	1 00 1 00	X						0	0	0
PAMELA HARKINS BOARD MEMBER	1 00 1 00	X						0	0	0
KANDACE HOLLEY BOARD MEMBER	1 00 1 00	X						0	0	0
BAVAN M HOLLOWAY BOARD MEMBER	1 00 1 00	X						0	0	0
KALEN HOLMES BOARD MEMBER	1 00 1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KATIE HONG BOARD MEMBER	1 00 1 00	X						0	0	0
CHRISTAL JENKINS BOARD MEMBER	1 00 1 00	X						0	0	0
LAURA JENNINGS BOARD MEMBER	1 00 1 00	X						0	0	0
JONELLE MC JOHNSON BOARD MEMBER	1 00 1 00	X						0	0	0
AMY KOSTERLITZ BOARD MEMBER	1 00 1 00	X						0	0	0
KAYCEE KRYSTY BOARD MEMBER	1 00 1 00	X						0	0	0
SANDRA MADRID BOARD MEMBER	1 00 1 00	X						0	0	0
SUSAN MASK BOARD MEMBER	1 00 1 00	X						0	0	0
N ELIZABETH MCCA W BOARD MEMBER	1 00 1 00	X						0	0	0
BARBARA S MORGAN BOARD MEMBER	1 00 1 00	X						0	0	0
BETSY MOSELEY BOARD MEMBER	1 00 1 00	X						0	0	0
JEANNIE NORDSTROM BOARD MEMBER	1 00 1 00	X						0	0	0
NINA ODELL BOARD MEMBER	1 00 1 00	X						0	0	0
TIM OTANI BOARD MEMBER	1 00 1 00	X						0	0	0
ANN RICKETT BOARD MEMBER	1 00 1 00	X						0	0	0
SHARON ROWLEY BOARD MEMBER	1 00 1 00	X						0	0	0
JILL RUCKLESHAUS BOARD MEMBER	1 00 1 00	X						0	0	0
PHYLLIS STARK BOARD MEMBER	1 00 1 00	X						0	0	0
DENISE STIFFARM BOARD MEMBER	1 00 1 00	X						0	0	0
KATHY SURACE-SMITH BOARD MEMBER	1 00 1 00	X						0	0	0
WENDE WAHL BOARD MEMBER	1 00 1 00	X						0	0	0
KORYNNE WRIGHT BOARD MEMBER	1 00 1 00	X						0	0	0
SUE SHERBROOKE CEO	40 00 1 00			X				127,622	0	18,734
KRIS LAMBRIGHT CFO	40 00 1 00			X				104,939	0	15,266
IRWIN BATARA HUMAN RESOURCES DIRECTOR	40 00 1 00					X		129,325	0	13,101