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DLN: 93493219002494

# Form **990**

Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

			nlendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31- C Name of organization	2013	D Founda		
_	ck ıf a ress ch	pplicable ange	SEATTLE INTERNATIONAL FOUNDATION			-	ntification number
	ne cha	-	Doing Business As		20-83	35099	5
_	al retu		Number and street (or P O box if mail is not delivered to street address) Room/suite				
_	mınate		1200 FIFTH AVENUE NO 1300		E Telepho	one num	nber
_	ended		City or town, state or province, country, and ZIP or foreign postal code		(206)	622-2	2294
— App	lication	n pendin	SEATTLE, WA 981013151		<b>G</b> Gross r	eceints	\$ 7,803,184
			F Name and address of principal officer	H(a)	Is this a group		· · ·
			JARED WATSON 1200 FIFTH AVENUE NO 1300		subordinates?	recuir	┌ Yes ┌ No
			SEATTLE, WA 981013151	H(b)	Are all subordi	nates	┌ Yes ┌ No
				(2)	included?	naces	, 163, 140
[ Ta:	r-exem	rpt statu	s		If "No," attach	a lıst	(see instructions)
J W	ebsite	e: <b>⊨</b> W	WW SEAIF ORG	H(c)	Group exempt	ion nu	mber ►
<b>K</b> Forr	n of or	ganızatıc	n 🔽 Corporation Trust Association Other ►	<b>L</b> Yea	or of formation 20		State of legal domicile
Da	rt I	S	nmary			W	/A
Fa			•				
			describe the organization's mission or most significant activities LE INTL FOUNDATION IS ORGANIZED & OPERATED AS A SUPPORTI	NGO	RG TO THE SE	ΔΤΤΙΙ	FFOUNDATION
Activities & Governance	2	Check	this box 🔭 if the organization discontinued its operations or disposed of	more t	han 25% of its	net as	ssets
ŝ		N	w of water was a state of the management had w (Doub VIII live of a)			۱ ۵	1
න් ආ			r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b)			3	!
Ę.			umber of individuals employed in calendar year 2013 (Part V, line 2a)			5	
<b>≨</b>			umber of volunteers (estimate if necessary)			6	
q,	7a -	Total u	nrelated business revenue from Part VIII, column (C), line 12			7a	2,45
	ь	Net un	related business taxable income from Form 990-T, line 34			7b	452
					Prior Year		Current Year
a)	8		ributions and grants (Part VIII, line 1h)		1,770,9		1,095,752
Rayenue	9		ram service revenue (Part VIII, line 2g)			079	21,103
Нэу	10 11		stment income (Part VIII, column (A), lines 3, 4, and 7d)		555,4	355	403,793
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line				
			<del> </del>		2,330,8	-	1,537,398
	13		ts and similar amounts paid (Part IX, column (A), lines 1-3)		2,278,	_	2,321,159
	14		Ifits paid to or for members (Part IX, column (A), line 4)			0	C
8	15	5-10			409,9	940	396,010
Expenses	16a	Profe	essional fundraising fees (Part IX, column (A), line 11e)			0	(
ਡੌ	b	Total	fundraising expenses (Part IX, column (D), line 25) ▶ <mark>7,501</mark>				
•	17		r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		470,6		710,002
	18		l expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,159,:	-	3,427,171
÷ φ	19	Keve	nue less expenses Subtract line 18 from line 12	Reg	-828,3		-1,889,773
Net Assets or Fund Balances					Year		End of Year
esse Bake	20		l assets (Part X, line 16)		15,577,		13,966,453
g g	21		l liabilities (Part X, line 26)		71,4		55,000
	22		assets or fund balances Subtract line 21 from line 20		15,506,	188	13,911,453
Unde my kr	owled	alties o dge and	nature Block  f perjury, I declare that I have examined this return, including accompanyi  d belief, it is true, correct, and complete Declaration of preparer (other thanknowledge				
		***	****		2014-08-05		
Sign		Sıg	nature of officer		Date		
Here			RED WATSON SECRETARY/TREASURER				
		Typ	pe or print name and title		T . —	DTTA	
Do:-			Print/Type preparer's name JANE M SEARING  Preparer's signature  Date 201	e 4-08-0!	Check if self-employed	PTIN P0000	0565
Paid Dro		ایر	Firm's name ► CLARK NUBER PS		Firm's EIN 🕨 9	1-11940	016
	pare Onl		Firm's address ► 10900 NE 4TH STREET SUITE 1700		Phone no (425	) 454-4	919
use	UII	ıv	· <del></del>		1 ,		

BELLEVUE, WA 98004

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

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		N o
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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part III</i> <b>1</b>	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 $IV^{\square}$	9		N o
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 $V^{\bullet}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $x^{\bullet}$	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI 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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV	,		1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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 $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	厂_
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 23			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country •_ See 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?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	70		
•	The rest, to line 5d of 5b, and the organization meronin 6000 from 1	5c		
	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?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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.			
а	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			
а	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		_
	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			
C	Enter the amount of reserves on hand	[		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
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 re-	sponse or note to any line in this Part VI							

<u> </u>	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Codi	e.)
		<del></del>		·,
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JANE REPENSEK 1200 FIFTH AVENUE 1300 SEATTLE, WA 98101 (206)622-2294

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	( <b>B)</b> A verage hours per	P os more			not	chec		( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list person is both an officer any hours and a director/trustee) o						from the organization	from related organizations	other compensation	
	for related organizations below dotted line)	Individual trustee	Institutional Trustee			Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
			អ៊ី ម			sated				
(1) WILLIAM CLAPP	1 00	х		х				0	0	0
PRESIDENT	0 00								, and the second	
(2) PAULA CLAPP	1 00	×		×				0	0	0
VICE PRESIDENT	0 00	_ ^		,				Ů	Ů	
(3) NORMAN B RICE	1 00	×		х				0	240,852	20,052
SECRETARY/TREASURER	48 00							Ŭ	240,032	20,032
(4) THOMAS WALDRON	1 00	x						0	0	0
TRUSTEE	0 00	^_						Ŭ	Ŭ	
(5) ROBERT WRIGHT	1 00	×						0	0	0
TRUSTEE	0 00	_ ^						Ŭ	ŭ	
(6) MAURICIO VIVERO	40 00			Х				172,630	0	16,918
EXECUTIVE DIRECTOR	0 00			L^				1,2,030	Ŭ	
										Form <b>990</b> (2013)

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

	<b>(A)</b> Name and Title	ne and Title Average hours per week (list any hours					heck unless officer stee)	i	( <b>C</b> Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W-		(F) Estima imount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												-		
												+		
1b	Sub-Total	<u> </u>	<u> </u>	<u> </u>	Ļ	<u> </u>		<b>•</b>						
c	Total from continuation shee		ection /	Α.				Þ						
d	Total (add lines 1b and 1c) .				•	•		•		172,630		52		36,970
2	Total number of individuals (ii \$100,000 of reportable comp						d abov	e) w	ho receive	d more th	an			
_											[		Yes	No
3	Did the organization list any <b>f</b> on line 1a? <i>If "Yes," complete</i> .						• mpic	yee, •	or nignes .	t compen	sated employee	3		No
4	For any individual listed on lir organization and related organization and related organizations.											4	Yes	
5	Did any person listed on line : services rendered to the orga									anızatıon	or individual for	5	103	No
5.	ection B. Independent Co	ontractors												
1	Complete this table for your fi compensation from the organi	ive highest comp											tax year	
	1	(A) Name and business	address							Des	(B) cription of services		(C Comper	
												+		
2	Total number of independent co	ontractors (inclu	dına but	t not	lımıt	ed to	thos	e list	ed above)	who rece	ıved more than			

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

rait v	
~ <u>~</u>	1a
rant	b
, Gi Ame	С
Giffs ilar	d
ns, Simi	е
utio ier (	f
ıtrib   Ot∯	b c d e f g
Contributions, Giffs, Grants and Other Similar Amounts	h
anue	2a
Pevel	ь
ice F	С
Serv	d
Tan.	e
Program Serwoe Revenue	
	2a b c d e f f 3 4 5 6a
	4
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Form 99							Page <b>9</b>
Part V	4 🕈 🖠 1	Statement of Revenue Check if Schedule O contains a response	onse or note to any lir	ne in this Part VIII			
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ इ	1a	Federated campaigns 1a	39,357				
ran	Ь	Membership dues 11	·				
s, G Am	С	Fundraising events 10					
Gift ilar	d	Related organizations 10	124,891				
ns, Sim	е	Government grants (contributions) 16					
utio ier S	f	All other contributions, gifts, grants, and similar amounts not included above	931,504				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$	5,033				
<u> </u>	h	Total. Add lines 1a-1f		1,095,752			
a E	2a	SEMINARS	Business Code	21 102	21 102		
ever	b P	SEMINARS	611710	21,103	21,103		
ў. Д	c						
er w	d						
<i>ა</i> ი ⊆	e						
Program Service Revenue	f	All other program service revenue					
<u>~</u>	g	<b>Total.</b> Add lines 2a-2f		21,103			
	3	Investment income (including divider and other similar amounts)		288,156			288,156
	4	Income from investment of tax-exempt bond	proceeds -				
	5	Royalties	,				
	6a	(1) Real	(II) Personal				
	ь	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
	_	(i) Securities	(II) Other				
	7a	Gross amount from sales of 6,381,423 assets other than inventory					
	ь	Less cost or other basis and 6,265,786					
	c	sales expenses Gain or (loss) 115,637					
	d	Net gain or (loss)		115,637			115,637
e n	8a	Gross income from fundraising events (not including					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
her.	ь	Less direct expenses b					
₹	С	Net income or (loss) from fundraising					
	9a	Gross income from gaming activities See Part IV, line 19					
	ь	Less direct expenses b					
		Net income or (loss) from gaming act					
	10a	Gross sales of inventory, less returns and allowances					
	ь	Less cost of goods sold b					
		Less cost of goods sold <b>b</b> Net income or (loss) from sales of inv	L/entory ▶				
		Miscellaneous Revenue	Business Code				
	11a	ADMINISTRATIVE FEE	541900	16,750		2,452	14,298
	ь						
	C	All other revenue					
	d e	Total. Add lines 11a-11d	🕨				
	12	Total revenue. See Instructions .		16,750			
	l _			1,537,398	21,103	2,452	418,091

# Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
--	-----------------------------------	--	---	----

	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	г
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	669,800	669,800		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,651,359	1,651,359		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	189,547	130,788	56,864	1,895
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	150,959	104,161	45,288	1,510
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	6,201	4,279	1,860	62
9	Other employee benefits	26,974	18,612	8,092	270
10	Payroll taxes	22,329	15,407	6,699	223
11	Fees for services (non-employees)				
а	Management				
b	Legal	130	90	39	1
C	Accounting	3,775	2,605	1,132	38
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	38,802		38,802	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	135,442	93,455	40,632	1,355
12	Advertising and promotion	86,634	59,778	<del>                                     </del>	866
13	Office expenses	49,189	33,940	<del>                                     </del>	492
14	Information technology	18,779	12,957	5,634	188
15	Royalties	10,115	12,55.	3,00 .	
16	Occupancy	35,301	24,358	10,590	353
17	Travel	87,375	87,375	· ·	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	31,515	31,515		
19	Conferences, conventions, and meetings	169,815	169,815		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,819	4,015	1,746	58
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)				
а	ADMINISTRATIVE FEES	59,599	17,880	41,719	
b	DUES & SUBSCRIPTIONS	7,702	5,315	2,310	77
c	ORGANIZATIONAL COSTS	3,512	2,423	1,054	35
d	UBITAX	318		318	
е	All other expenses	7,810	5,389	2,343	78
25	Total functional expenses. Add lines 1 through 24e	3,427,171	3,113,801	305,869	7,501
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 ► ☐ if following SOP 98-2 (ASC 958-720)				
		-	•	·	

Form 990 (2013)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		0	1	472,043
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		17,129	4	55,385
	5	Loans and other receivables from current and former officers, direct key employees, and highest compensated employees. Complete P Schedule L	art II of		5	
sts	6	Loans and other receivables from other disqualified persons (as desection $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , employers and sponsoring organizations of section $501(c)(9)$ volubeneficiary organizations (see instructions) Complete Part II of Sc	and contributing ntary employees'		6	
4ssets	7	Notes and loans receivable, net			7	
٦	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,196	9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	,,,,,,		
	ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities		14,353,243	11	12,232,924
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		1,200,000	13	1,200,000
	14	Intangible assets			14	· · ·
	15	Other assets See Part IV, line 11		6,101	15	6,101
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		15,577,669	16	13,966,453
	17	Accounts payable and accrued expenses		21,481	17	0
	18	Grants payable		50,000	18	55,000
	19	Deferred revenue		30,333	19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedul			21	
ities	22	Loans and other payables to current and former officers, directors,			21	
Liabili		key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
ï	23	Secured mortgages and notes payable to unrelated third parties			23	
	24				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X				
		D			25	
	26	Total liabilities. Add lines 17 through 25		71,481	26	55,000
φ		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ a lines 27 through 29, and lines 33 and 34.	nd complete			
ဋ	27	Unrestricted net assets		15,506,188	27	13,911,453
<u></u>	28	Temporarily restricted net assets			28	<u> </u>
	29	Permanently restricted net assets			29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	► and			
O .0	30	Capital stock or trust principal, or current funds			30	
φ	31	Paid-in or capital surplus, or land, building or equipment fund			31	
S.	32	Retained earnings, endowment, accumulated income, or other fund			32	
Net 1	33	Total net assets or fund balances	_	15,506,188	33	13,911,453
Ž	34	Total liabilities and net assets/fund balances		15 577 669		13,966,453

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,5	537,398
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,4	127,171
3	Revenue less expenses Subtract line 2 from line 1	3			389,773
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			506,188
5	Net unrealized gains (losses) on investments	5			295,038
6	Donated services and use of facilities	6			<u>·</u>
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		13,9	911,453
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	1e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
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?	9	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

### **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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization SEATTLE INTERNATIONAL FOUNDATION Employer identification number

20-8350995

Б-		Danaan far Di	blic Charity Ct-	/ A II - · · ·				720-6330		
			Iblic Charity Star te foundation becaus						iistructioi	15.
	_	· · · · · · · · · · · · · · · · · · ·		•			**	-		
1			ion of churches, or as				ection 170	(D)(1)(A)(I).		
2	_		in section 170(b)(1				170/b)/1			
3	_	•	perative hospital se	<del>-</del>					(4)/4)/!!!	Fatantha
4			h organization operat	tea in conjun	iction with a	i nospitai des	cribea in <b>s</b> e	ection 170(D)	(1)(A)(III)	. Enter the
5		nospital's name, c An organization on	erated for the benefi	t of a college	or universi	ity owned or o	pperated by	a governmer	ıtal unıt de	scribed in
-			(A)(iv). (Complete P			,	, polatou 2,	a governmen		
6	_		local government or	•	tal unit desc	ribed in <b>sect</b>	ion 170(b)(	1)(A)(v).		
7		•	at normally receives	5			` '		from the ae	eneral public
-	•	<del>-</del>	on 170(b)(1)(A)(vi).		•	- прределение				
8	$\Gamma$ 4	community trust	described in <b>sect ior</b>	170(b)(1)(	<b>A)(vi)</b> (Co	mplete Part I	I)			
9	$\Gamma$ 4	n organization th	at normally receives	(1) more th	ian 331/3% (	of its support	from contr	ıbutıons, men	nbership fe	es, and gross
	r	eceipts from activ	rities related to its ex	xempt functi	ons—subjec	t to certain e	exceptions,	and (2) no m	ore than 3	31/3% of
	I	ts support from gr	oss investment inco	me and unre	lated busine	ess taxable ır	ncome (less	section 511	tax) from	businesses
	ā	cquired by the org	ganızatıon after June	30,1975 S	ee <b>section</b>	<b>509(a)(2).</b> (C	Complete Pa	art III )		
10		n organization or	ganızed and operated	d exclusively	to test for	public safety	See <b>sect i</b> c	on 509(a)(4).		
11		ne or more public	ganized and operated ly supported organiz	atıons descr	ıbed ın sect	ion 509(a)(1	) or section	n 509(a)(2) S	•	
	t		ibes the type of supp <b>b</b> Type II <b>c</b>						on-functio	nally integrated
е		•	ox, I certify that the	_			•			•
			ion managers and otl	her than one	or more pul	blicly support	ed organiza	ations describ	oed in sect	ıon 509(a)(1) or
f		section 509(a)(2)	received a written de	otormination	from the ID	C that it is a	Typo I Ty	no II or Type	III cuppo	rting organization
•		theck this box	received a written d	etermination	nom the IN	S that it is a	Type I, Ty	pe II, or Type	: III Suppo	rting organization,
g			2006, has the organi	ızatıon accep	oted any gift	t or contributi	on from an	y of the		•
		ollowing persons?								
			irectly or indirectly o				persons de	escribed in (ii		Yes No
			governing body of th			n?			——	<b>1g(i)</b> No
			er of a person descr						<b>—</b>	Lg(ii) No
			lled entity of a perso						11	lg(iii) No
h	F	Provide the followi	ng information about	the support	ed organızat	tion(s)				
(i) l	Name of	(ii) EIN	(iii) Type of	(iv) Is t	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
-	ported		organization	organızatı		the organi		organizat		monetary
orga	nization	וי	(described on lines 1- 9 above	col (i) list		in col (i) o		col (i) org		support
			or IRC section	your gove docume		suppor	('	In the o	5 '	
			(see	accame						
			instructions))	Yes	No	Yes	No	Yes	No	
(A) T	HE			163	140	163	140	162	140	+
ŠEAT	TLE	016012526	7	Yes		Yes		l vac		2 200 750
FOU	IDATION	916013536	'	1 65		lies		Yes		2,380,758
								+		
		I	i	I	1	1	1	1	1	I

2,380,758

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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 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. 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						
Return Reference	Explanation					
SCHEDULE A, PART I, LINE 11H, COLUMN (VII)	AMOUNTS FOR THE BENEFIT OF THE SEATTLE FOUNDATION 2,321,159 EXPENSES PAID TO THE SEATTLE FOUNDATION 59,599 TOTAL 2,380,758					

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493219002494

OMB No 1545-0047

#### **SCHEDULE D Supplemental Financial Statements** (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Nar	ne of the organization ITLE INTERNATIONAL FOUNDATION		Emp	ployer identification number
SEA	THE INTERNATIONAL FOUNDATION		20-	8350995
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor adv	rised <b>Yes N</b>
5	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?			
Pai	t II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	m 990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization held a	or education)	certifie	ed historic structure
	easement on the last day of the tax year			
				Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	• •	2c	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d	
	Number of conservation easements modified, transferr the tax year ▶	ea, releasea, extinguisnea, or terminat	tea by tr	ne organization during
	the tax year F			
	Number of states where property subject to conservati	on easement is located 🗠		
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	he periodic monitoring, inspection, hai	ndling of	f violations, and Yes N
5	Staff and volunteer hours devoted to monitoring, inspect	cting, and enforcing conservation ease	ements	during the year
,	Amount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year
	<b>*</b> \$			
	Does each conservation easement reported on line 2 (c) and section $170(h)(4)(B)(II)$ ?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı) <b>Yes                                   </b>
l	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia		
ar	Organizations Maintaining Collection Complete if the organization answered "Y		, or Ot	ther Similar Assets.
.a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education	statem	nent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS			· ·
a	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
b	Assets included in Form 990, Part X			<u></u>
_	A 3 3 E L 3 I II L I I I I I I I I I I I I J J U , F d I L X			F P

Par	<b>Tit</b> Organizations Maintaining Co	llections of Art,	Histoi	<u>'ical</u>	Treasur	es, or O	<u>ther</u>	Similar	Asse	ts (co	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, checl	k any c	of the follo	wing that a	re a	sıgnıfıcant	use of	ıts	
а	Public exhibition		d 「	Loa	n or exch	ange progi	ams				
b	Scholarly research		е Г	Oth	ner						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey furt	her the or	ganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit							ılar	_		_
	assets to be sold to raise funds rather than t	<u>`</u>						" -		Yes	No
Par	Part IV, line 9, or reported an ar					answere	a "Ye	es" to For	m 990	',	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	liary for	contri	butions or	r other ass	ets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing	table		_					
						-			Amou	ınt	
C	Beginning balance					-	1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the $\epsilon$	explana	tion ha	s been pr	ovided in f	oart >	(III			Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	<b>(b)</b> Prio	r year	<b>b (c)</b> Tw	o years back	(d)⊺	hree years b	ack (e	)Four ye	ears back
1a	Beginning of year balance						-				
b	Contributions						_				
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1	g, colu	ımn (a)) h	eld as					
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment -										
С	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organizat	tion that	are h	eld and ad	lmınıstere	d for t	:he			
	organization by									Yes	No
	(i) unrelated organizations			•			•		3a(i)		
L	(ii) related organizations								3a(ii)	 	
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second or the seco						•		3b		
	t VI Land, Buildings, and Equipme				on answ	ered 'Ves	' to	Form 990	Part	TV lır	16
I GII	11a. See Form 990, Part X, line		ic orga	mzati	On answ	ered res		01111 550	, rait	1 V , III	ic
	Description of property				st or other nvestment)	(b)Cost or basis (ot		(c) Accur deprec		( <b>d)</b> B	ook value
	Land										
b	Buildings		.								
	Leasehold improvements		.								
	Equipment		.							1	
	• •		- ⊢			<del>                                     </del>		<del> </del>		+	
е	Other		.								

<b>Part VII Investments—Other Securities.</b> Co See Form 990, Part X, line 12.	mplete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
O ther		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. C	Complete if the organization	answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1) GLOBAL PARTNERS MICRO	1,000,000	С
(2) GLOBAL PARTNERS SOCIAL	200,000	С
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization	1,200,000	, Part IV , line 11d See Form 990 , Part X , line 15
(a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
		Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(b) Book value	
	(b) Book value	
Federal income taxes		
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>þ</b>	
2. Liability for uncertain tax positions In Part XIII, provide	le the text of the footnote to the	e organization's financial statements that

Par		<b>evenue per Audited Financial Stat</b> vered 'Yes' to Form 990, Part IV, line 1		is with kevenue	per ĸ	<b>eturn</b> Complete i
1		r support per audited financial statements			1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a			
b	Donated services and use of f	acılıtıes	2b			
c	Recoveries of prior year grant	s	2c			
d	Other (Describe in Part XIII )		2d			
е	Add lines <b>2a</b> through <b>2d</b> .		<del></del>		2e	
	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
С	Add lines <b>4a</b> and <b>4b</b>				4c	
	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Complet
		swered 'Yes' to Form 990, Part IV, line			1 .	T
	· ·	raudited financial statements			1	
		t not on Form 990, Part IX, line 25	1 -	I		
3		acilities	2a		_	
b			2b		_	
c			2c			
d	Other (Describe in Part XIII )		2d		4 _	
е	_				2e	
					3	
		0, Part IX, line 25, but not on line 1:	1	I		
a	·	uded on Form 990, Part VIII, line 7b			_	
b			4b		4	
<b>C</b>					4c	
		nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 18 )		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

#### Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

SEA	TTLE INTERNATIONAL FOUNDA	ATION			20-8350995								
Pa	"Yes" to Form 990, Pai	<b>n on Activitie</b> rt IV, lıne 14b.	es Outside th	ne United States. Co	omplete if the organiza	ation answered							
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and												
	other assistance, the grantee	other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used											
	to award the grants or assista	ance?				✓ Yes							
2	<b>For grantmakers.</b> Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its grant	s and other							
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ace is needed )								
	<b>(a)</b> Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region							
	See Add'l Data		region	regiony									
						_							
3a	Sub-total	0	0			1,819,534							
Ŀ	Total from continuation sheets to Part I	0	0			0							
_	Totale (add lines 3a and 3h)	1 ^	l n			1 9 1 0 5 2 4							

art II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	<b>(c)</b> Region	( <b>d)</b> Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								
	_								

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

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

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

(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisal, other)
							ula E (Earry 000) 2012

### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	▼	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	[ব	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	।	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	굣	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	া	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u>~</u>	No

Schedule F (Form 990) 2013

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

this part to provide an	ny additional information (see instructions).
ReturnReference	Explanation
PART I, LINE 2	WE CONDUCT PRE- GRANT INQUIRIES, HAVE GRANT AGREEMENTS, PROVIDE A SEPARATE ACCOUNTING OF THE FUNDS, AND INVESTIGATE ANY DIVERSIONS FOR ALL GRANTS LEAVING THE UNITED STATES AS REQUIRED THE GRANTEE IS EXPECTED TO PROVIDE A REPORT
	ON HOW THE MONEY WAS SPENT AND WHAT PROGRAM AREAS WERE IMPACTED
SCHEDULE F, PART IV, LINE 1	FORM 926 IS NOT REQUIRED TO BE FILED BECAUSE THE TRANSFER TO A FOREIGN CORPORATION DOES NOT MEET THE REPORTING REQUIREMENTS IN IRC SEC 6038(A)(1) (A)
-	

#### **Additional Data**

Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	3
CENTRAL AMERICA AND THE CARIBBEAN	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	1,203,160
EAST ASIA AND THE PACIFIC	0	_	GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	105,800
MIDDLE EAST AND NORTH AFRICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	15,000

Form 990 Schedule F	orm 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region						
NORTH AMERICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	15,000						
SOUTH AMERICA	0	=	GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	32,000						
SOUTH ASIA	0	=	GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	85,400						

Form 990 Schedule F I	Part I - Activit	<u>ties Outside T</u>	he United States			
(a) Region	(b) Number of offices in the region agents in region		(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
SUB-SAHARAN AFRICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	GRANTMAKING	195,000	
CENTRAL AMERICA AND THE CARIBBEAN	0	0		EXPENSES INCURRED FOR PROGRAM ACTIVITIES IN THE REGION	168,174	

Form 990 Sched	ule F Part II	Grants or Entitic	es Outside The Uni	ted States		_		_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		CARIBBEAN	TO CONDUCT RESEARCH AND PUBLISH THE 2013 SOCIAL INCLUSION INDEX TO INCLUDE ALL THE COUNTIES OF CENTRAL AMERICA AND BE TRANSLATED INTO SPANISH	30,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE GENERAL OPERATING SUPPORT TO FUND PROGRAMS SERVING PRIMARILY INDIGENOUS COMMUNITIES NEAR SANTA CRUZ, GUATEMALA	15,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	SUPPORT FOR THE YOUTH SEX EDUCATION PROGRAM	3,750	CHECK		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE GENERAL OPERATING SUPPORT	22,913	CHECK		N/A	N/A

Form 990 Sched	ule F Part II	- Grants or Entitie	s Outside The Uni	ted States			_	_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		NORTH AFRICA	TO PROVIDE SUPPORT FOR WORK WITH WOMEN TEACHERS IN AFGHANISTAN	15,000	CHECK		N/A	N/A
			TO PROVIDE GENERAL OPERATING SUPPORT TO FUND BLFA'S EFFORTS TO TREAT BURKITT'S LYMPHOMA, A RARE BUT TREATABLE PEDIATRIC CANCER, IN TANZANIA, UGANDA AND KENYA	15,000	CHECK		N/A	N/A
				20,000	CHECK		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN		32,000	CHECK		N/A	N/A

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	TO ADVANCE SIF'S SPECIAL INITIAITIVE IN GUATEMALA	200,000	CHECK		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO PROVIDE GENERAL OPERATING SUPPORT	16,500	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFIC	TO PROVIDE SUPPORT FOR WORK WITH WOMEN WITH DISABILITIES IN LAOS	15,000	СНЕСК		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT THE 2013 INTERNATIONAL FELLOWSHIP PROGRAM, TO TRAIN ENVIRONMENTAL LEADERS FROM 12 COUNTRIES	15,000	CHECK		N/A	N/A

Form 990 Sched	ule F Part II	Grants or Entitic	es Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			TO PROVIDE SUPPORT FOR WORK WITH WOMEN HEALTH PROMOTERS IN BOLIVIA		СНЕСК		N/A	N/A
		AND THE CARIBBEAN	TO SUPPORT CORE PROGRAMS FOR YOUNG WOMEN'S ORGANIZATIONS THROUGHOUT THE REGION	25,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	TO SUPPORT THE PROGRAM STRENGTHENING YOUNG WOMEN'S LEADERSHIP IN HONDURAS, BELIZE, AND GUATEMALA	50,000	СНЕСК		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE GENERAL SUPPORT FOR THE CENTRAL AMERICA LEADERSHIP INITIATIVE	25,000	СНЕСК		N/A	N/A

Form 990 Sched  (a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	es Outside The Unit	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		AND THE CARIBBEAN	TO PROVIDE GENERAL SUPPORT AS RECOGNITION FOR THE 2012 MCNULTY PRIZE	10,000	CHECK		N/A	N/A
			TO SUPPORT THE CAPTA PROGRAM	10,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	CALICANTO AND THEIR CAPTA PROGRAM A VOCATIONAL TRAINING AND PERSONAL DEVELOPMENT PROGRAM FOR WOMEN FROM IMPOVERISHED AREAS OF PANAMA, THANKS TO THE SUPPORT OF THE MCNULTY FOUNDATION		СНЕСК		N/A	N/A
		AND THE CARIBBEAN	TO SUPPORT EDUCATIONAL OPPORTUNITIES FOR YOUNG WOMEN IN TOTONICAPAN, GUATEMALA	10,800	СНЕСК		N/A	N/A

Form 990 Sched	ule F Part II	- Grants or Entitic	es Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	TO SUPPORT THEIR TWO MAIN PROGRAMS IN GUATEMALA AND VIETNAM	12,500	СНЕСК		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE GENERAL OPERATING SUPPORT TO GROW AND DEVELOP STAFF CAPACITY AND LEADERSHIP IN GUATEMALA	15,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE SUPPORT FOR WORK WITH MIDWIVES, WOMEN AND CHILDREN IN GUATEMALA	15,000	CHECK		N/A	N/A
			TO SUPPORT THE CONSTRUCTION OF A TWO STORY PERMANENT MEDICAL CLINIC AND PROVISION OF MEDICINES AND MEDICAL CARE OVER THE COURSE OF A YEAR IN HAITI		CHECK		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		AND THE CARIBBEAN	\$60,000 TO SUPPORT 5 WOMEN FROM CENTRAL AMERICA FOR THE 2013 ILEAP LEADERSHIP PROGRAM, DESIGNED IN PARTNERSHIP WITH SIF, AND \$30,000 TO SUPPORT 1/2 THE COSTS FOR 5 SPOTS FOR WOMEN LEADERS FROM SIF LOCAL GRANTEES, ALSO FOR THE 2013 ILEAP PROGRAM	60,000			N/A	N/A
		SUB-SAHARAN AFRICA	\$30,000 TO SUPPORT 1/2 THE COSTS FOR 5 SPOTS FOR WOMEN LEADERS FROM SIF LOCAL GRANTEES, ALSO FOR THE 2013 ILEAP PROGRAM	30,000			N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO PROVIDE GENERAL SUPPORT	70,788	СНЕСК		N/A	N/A
		AND THE CARIBBEAN	FOR THEIR WORK WITH WOMEN GRASSROOTS LEADERS FROM CENTRAL AMERICA	15,000	CHECK		N/A	N/A

Form 990 Schedi	ule F Part II	Grants or Entiti <i>r</i>	es Outside The Uni	ited States	-			,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	TO SUPPORT THE SOUTHEAST ASIA LEADERSHIP INITIATIVE	37,500	CHECK		N/A	N/A
			TO PROVIDE SUPPORT FOR WORK WITH WOMEN HERDERS IN MONGOLIA AND KYRGYZSTAN		CHECK		N/A	N/A
		AND THE CARIBBEAN	TO BUILD LEADERSHIP CAPACITY IN YOUNG WOMEN AND SERVING WOMEN AND CHILDREN WHO ARE DOMESTIC VIOLENCE		СНЕСК		N/A	N/A
		AND THE	TO PROVIDE GENERAL SUPPORT	10,000	СНЕСК		N/A	N/A

Form 990 Sched	ule F Part II	- Grants or Enti	ties Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ANNUAL EVENT ON MARCH 8TH, INTERNATIONAL WOMEN'S DAY	2,500	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFIC	TO PROVIDE GENERAL SUPPORT	7,500	СНЕСК		N/A	N/A
		SUB-SAHARAN AFRICA	TO PROVIDE SUPPORT FOR WORK WITH COMMUNITIES IN GHANA, WITH A FOCUS ON PREGNANT WOMEN AND MOTHERS	15,000	CHECK		N/A	N/A
		SUB-SAHARAN AFRICA	TO SUPPORT THE CONSTRUCTION OF A PROFESSIONAL MORTUARY IN RURAL KENYA, AND PROVIDE THE NECESSARY EQUIPMENT AND STAFFING TO BEGIN TO RUN THE MORTUARY AS AN INCOME- GENERATING PROJECT OF MED25	15,000	CHECK		N/A	N/A

Form 990 Sched	ule F Part II	Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	TO PROVIDE GENERAL SUPPORT	75,000	CHECK		N/A	N/A
		SOUTH ASIA	TO PROVIDE CONTINUED SUPPORT FOR THE DIGITAL STUDY HALL PROGRAM IN INDIA	15,000	CHECK		N/A	N/A
		SUB-SAHARAN AFRICA	TO PROVIDE SUPPORT FOR WORK WITH WOMEN WITH FISTULA AND COMMUNITY HEALTH PROMOTERS IN KENYA	15,000	CHECK		N/A	N/A
		NORTH AMERICA	TO PROVIDE SUPPORT FOR WORK WITH MALNOURISHED CHILDREN AND WOMEN IN CHIAPAS, MEXICO	15,000	CHECK		N/A	N/A

Form 990 Schedule F Part II - G	Grants or Entities	s Outside The Un	ited States
(h) IPS codo			

Form 990 Sched	ule F Part II	- Grants or Entiti€	es Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		A N D T H E C A R I B B E A N	TO SUPPORT THEIR LEADERSHIP AND CIVIC ENGAGEMENT PROGRAMS, TO REACH OVER 600 YOUTH THROUGH EDUCATIONAL SCHOLARSHIPS, YOUTH-LED COMMUNITY PROJECTS, AND ADVOCACY CAMPAIGNS IN EL PROGRESO, HONDURAS	33,000	CHECK		N/A	N/A
		EAST ASIA AND	TO PROVIDE GENERAL SUPPORT	15,000	СНЕСК		N/A	N/A
		THE PACIFIC	FOR THEIR WORK REMOVING EXPLOSIVE REMNANTS OF WAR AND LEADING SURVIVOR ASSISTANCE AND MINE RISK EDUCATION PROGRAMS IN VIETNAM	15,000	CHECK		N/A	N/A
		AND THE CARIBBEAN	TO PROVIDE SUPPORT FOR WORK WITH YOUTH IN THE DOMINICAN REPUBLIC	10,000	CHECK		N/A	N/A

Form 990 Schedu	1	- Grants or Entitie	s Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			TO PROVIDE GENERAL OPERATING SUPPORT FOR POF'S WORK SERVING HUNDREDS OF INDIVIDUALS WITH DISABILITIES, AND THOUSANDS OF COMMUNITY MEMBERS THAT BENEFIT FROM INCREASED CAPACITY IN LOCAL HEALTH PROFESSIONALS	15,000	СНЕСК		N/A	N/A
		CENTRAL AMERICA	<del>                                     </del>	42,009	СНЕСК		N/A	N/A
		A N D T H E C A R I B B E A N	TO SUPPORT THEIR YOUTH LEADERSHIP ADVOCACY PROGRAM FOCUSED ON INCREASING ACCESS TO SEXUAL EDUCATION AND ADEQUATE REPRODUCTIVE HEALTH CARE IN THE PUBLIC SCHOOL AND HEALTH SYSTEMS IN SEVERAL STATES IN GUATEMALA	25,000			N/A	N/A
			TO SUPPORT EDUCATIONAL OPPORTUNITIES FOR LOW-INCOME CHILDREN IN FIJI	9,300	CHECK		N/A	N/A

Form 990 Schedi	ale F Part II	[ - Grants or Entitie	es Outside The Uni	ited States		_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			TO PROVIDE GENERAL SUPPORT	1,300	CHECK		N/A	N/A
		AFRICA	TO PROVIDE SUPPORT FOR RGI'S TEACHER CAPACITY BUILDING PROGRAM, AND THE CREATION OF THE UNIVERSITY COUNSELING AND EXAM PREPARATION PROGRAM AT THIS SCHOOL OF GIRLS IN RWANDA	15,000	CHECK		N/A	N/A
		THE PACIFIC	TO PROVIDE SUPPORT FOR WORK WITH CHILDREN IN CAMBODIA	15,000	CHECK		N/A	N/A
		AND THE	TO PROVIDE GENERAL SUPPORT	80,000	CHECK		N/A	N/A

Form 990 Schedule F Part II	- Grants or E	intities Outside	ine United States
(b) IRS code			

Form 990 Schedu	ıle F Part II	<ul> <li>Grants or Entitie</li> </ul>	es Outside The Unit	ted States		_		_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	TO SUPPORT THE "HEALTH CENTER BY PHONE" PROJECT, TO IMPROVE THE COVERAGE AND QUALITY OF MATERNAL, NEWBORN, AND CHILD HEALTH SERVICES IN RURAL MALAWI THROUGH THE EXPANSION OF A TOLL-FREE HOTLINE OFFERING A VARIETY OF SERVICES FOR WO MEN AND CHILDREN	15,000	CHECK		N/A	N/A
		SOUTH AMERICA	TO CARRY OUT A FEASIBILITY STUDY IN BOLIVIA	15,000	CHECK		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	\$65,000 TO SUPPORT YOUR CITIZEN SECURITY INITIATIVE	65,000	CHECK		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	ORGANIZE A U S CONGRESSIONAL DELEGATION TRIP TO CENTRAL AMERICA IN 2014	25,000	CHECK		N/A	N/A

rorm 990 Scheau	ie i part ii	- Grants or Entitle	s outside ine uni	tea States		_	_	_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			TO SUPPORT THE CONSTRUCTION OF WATER PROJECTS	15,000	CHECK		N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	TO PROVIDE GENERAL SUPPORT	184,500	CHECK		N/A	N/A

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

Department of the Treasury

SEATTLE INTERNATIONAL FOUNDATION

Internal Revenue Service

Name of the organization

# **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 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

**Employer identification number** 

DLN: 93493219002494

Open to Public Inspection

						20-8350995	
Part I General Informatio	n on Grants and	Assistance				•	
<ul> <li>Does the organization maintain the selection criteria used to aw</li> <li>Describe in Part IV the organization</li> </ul>	ard the grants or ass	ıstance <sup>?</sup>					✓ Yes
Part II Grants and Other A Form 990, Part IV, line							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
<b>2</b> Enter total number of section 50	)1(c)(3) and governm	nent organizations list	ed in the line 1 table.			►	9

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

П	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.	

APPROVED BY THE SUPPORTING ORGANIZATION BOARD OR THE SUPPORTING ORGANIZATION GRANT COMMITTEE PRIOR TO

DISTRIBUTION A QUORUM MUST BE MET FOR DISTRIBUTION

(a)Type of grant or assistand	nce (b)Number of (c)A mount of (d)A mount of recipients cash grant non-cash assistance				(e)Method of valuation (book, FMV, appraisal, other)				
Part IV Supplemental I	nforma	tion. Provide the info	ormation required in Pa	rt I, lıne 2, Part III, col	umn (b), and any other a	dditional information.			
Return Reference	Explana	ition							
PART I, LINE 2	DUE DILIGENCE IS PERFORMED ON ALL GRANT RECOMMENDATIONS BY THE GRANTS ADMINISTRATOR GRANTS ARE REVIEWED AND								

Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

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

Form 990,Schedule 1, Pa	rt 11, Grants and	d Other Assistance	e to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL IMPACT 66 CANAL CENTER PLZ STE 310 ALEXANDRIA, VA 223141568	52-1273585	509(A)(1) OR (A)(2)	5,000		N/A	N/A	TO PROVIDE SUPPORT FOR RESEARCH, RESEARCH, STRATEGY DEVELOPMENT, AND OUTREACH ASSISTANCE
GLOBAL IMPACT 66 CANAL CENTER PLZ STE 310 ALEXANDRIA, VA 223141568	52-1273585	509(A)(1) OR (A)(2)	1,000		N/A	N/A	TO PROVIDE SUPPORT FOR THE PACIFIC NORTHWEST GLOBAL DONORS CONFERENCE, AN ANNUAL, LOCAL LEARNING EVENT TO ENCOURAGE GLOBAL GIVING
GLOBAL PARTNERSHIPS 909 NE BOAT ST STE 200 SEATTLE, WA 981056672	82-0574491	509(A)(1) OR (A)(2)	200,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
GLOBAL PARTNERSHIPS 1932 1ST AVE STE 400 SEATTLE,WA 981012442	82-0574491	509(A)(1) OR (A)(2)	50,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
GLOBAL PARTNERSHIPS 1932 1ST AVE STE 400 SEATTLE,WA 981012442	82-0574491	509(A)(1) OR (A)(2)	37,500		N/A	N/A	TO PROVIDE GENERAL SUPPORT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) OR (A)(2)	1,000		N/A	N/A	TO PROVIDE SUPPORT FOR THEIR 2013 ANNUAL EVENT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) OR (A)(2)	3,750		N/A	N/A	TO PROVIDE GENERAL SUPPORT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE,WA 981445104	71-0872239	509(A)(1) OR (A)(2)	54,300		N/A	N/A	TO PROVIDE GENERAL SURPPORT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE,WA 981445104	71-0872239	509(A)(1) OR (A)(2)	2,250		N/A	N/A	TO PROVIDE GENERAL SURPPORT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) OR (A)(2)	15,000		N/A	N/A	TO PROVIDE SUPPORT FOR GV'S COLLABORATION WITH TREEHOUSE TO PROVIDE FOSTER YOUTH WITH ACCESS TO GV'S PROGRAMS

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United St	ates	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1)OR(A)(2)	12,500		N/A		TO SUPPORT GV'S COLLABORATION WITH TREEHOUSE TO PROVIDE FOSTER YOUTH WITH ACCESS TO GV'S PROGRAMS
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) OR (A)(2)	500		N/A	1 7	TO PROVIDE GENERAL SUPPORT
GLOBAL VISIONARIES 2524 16TH AVE S RM 305 SEATTLE, WA 981445104	71-0872239	509(A)(1) OR (A)(2)	3,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT
GLOBAL WASHINGTON 500 UNION ST STE 801 SEATTLE, WA 981014046	27-0521628	509(A)(1) OR (A)(2)	150,000		N/A		TO PROVIDE GENERAL OPERATING SUPPORT
HUMANOSPHERE 1636 N 54TH ST SEATTLE, WA 981036120	46-1039670	509(A)(1)OR(A)(2)	20,000		N/A		THIS GRANT AIMS TO PROMOTE REDUCTION IN POVERTY AND DISEASE GLOBALLY THROUGH BETTER DOCUMENTATION AND PROVISION OF A VOICE FOR THOSE WORKING AND LIVING IN POOR COUNTRIES
HUMANOSPHERE 1636 N 54TH ST SEATTLE,WA 981036120	46-1039670	509(A)(1) OR (A)(2)	15,000		N/A	1 '	TO PROVIDE GENERAL SUPPORT
HUMANOSPHERE 1636 N 54TH ST SEATTLE, WA 981036120	46-1039670	509(A)(1) OR (A)(2)	20,000		N/A		TO PROVIDE SUPPORT FOR COVERAGE ON GLOBAL DEVELOPMENT ISSUES AND WASHINGTON STATE NONPROFITS WORKING GLOBALLY, WITH A FOCUS ON GLOBAL WASHINGTON
ONEWORLD NOW 220 2ND AVE S STE 102 SEATTLE, WA 981042617	26-4729771	509(A)(1) OR (A)(2)	15,000		N/A		TO PROVIDE GENERAL OPERATING SUPPORT TO SERVE ECONOMICALLY DISADVANTAGED AND UNDERSERVED HIGH SCHOOL AND MIDDLE SCHOOL YOUTH FROM THE SEATTLE-AREA, THROUGH LANGUAGE AND LEADERSHIP DEVELOPMENT PROGRAMS AND OPPORTUNITIES TO
THE SEATTLE TIMES PO BOX 70 SEATTLE, WA 981110070			25,000		N/A		TO EXPAND COVERAGE ON WASHINGTON STATE NONPROFITS WORKING GLOBALLY, WITH A FOCUS ON SIF GRANTEES AND GLOBAL WASHINGTON MEMBERS
UNIVERSITY OF WASHINGTON FOUNDATION BOX 359505 GIFT PROCESSING SEATTLE, WA 981959505	94-3079432	509(A)(1) OR (A)(2)	13,500		N/A		TO PROVIDE SUPPORT FOR THE 2013 GLOBAL SOCIAL ENTREPRENEURSHIP COMPETITION

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WASHINGTON STATE COALITION AGAINST DOMESTIC VIOLENCE 500 UNION STREET STE 200 SEATTLE, WA 98101	91-1507028	509(A)(1) OR (A)(2)	5,500		N/A		TO PROVIDE SUPPORT FOR ANALYSIS ON SUCCESSFUL MODELS & BEST PRACTICES/VICTIMS OF VIOLENCE				
WORLD AFFAIRS COUNCIL 2200 ALASKAN WAY STE 450 SEATTLE, WA 981213600	91-0586924	509(A)(1)OR(A)(2)	20,000		N/A	N/A	TO PROVIDE GENERAL SUPPORT				

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OMB No 1545-0047

### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

**Compensation Information** 

Open to Public Inspection

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

20-8350995

Pai	Ttle Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
D	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation		
		(i) Base compensation	(ii) Bonus & ıncentıve compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990		
	(i) (ii)	0 219,068	0	0 21,784	0 12,025	0 8,027	0 260,904	0 0		
(2)MAURICIO VIVERO EXECUTIVE DIRECTOR	(i) (ii)	169,030	0	3,600 0	9,440	7,478 0	189,548 0	0		

Schedule J (Form 990) 2013

### Part III Supplemental Information

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

rise complete this part for any dualties									
Return Reference	Explanation								
	COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD MEMBERS THEY COMPILED SALARY INFORMATION FOR THE EXECUTIVE DIRECTOR IN A SIMILAR POSITION AND DETERMINED THE AVERAGE SALARY THE BOARD OF DIRECTORS FOR SEATTLE INTERNATIONAL FOUNDATION APPROVED THE SALARY THE OTHER OFFICERS OF THE BOARD ARE UNCOMPENSATED BY SEATTLE INTERNATIONAL FOUNDATION								

Schedule J (Form 990) 2013

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OMB No 1545-0047

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# **SCHEDULE 0** (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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization SEATTLE INTERNATIONAL FOUNDATION

**Employer identification number** 

20-8350995

990 Schedule O, Supplemental Information									
Return Reference	Explanation								
FORM 990, PART I, LINE 6	THERE ARE FOUR VOLUNTEER BOARD MEMBERS THAT SERVED DURING THE YEAR BOARD MEMBERS ASSIST WITH THE OPERATIONS OF THE ORGANIZATION AND GRANT OVERSIGHT								
FORM 990, PART VI, SECTION A, LINE 2	WILLIAM CLAPP AND PAULA CLAPP HAVE A FAMILY RELATIONSHIP								
FORM 990, PART VI, SECTION A, LINE 6	THERE ARE TWO CLASSES OF MEMBERS IN THE BY LAWS FOR THE ORGANIZATION THE FIRST CLASS IS DESIGNATED TO THE FOUNDATION MEMBER AND THE SECOND CLASS IS DESIGNATED TO THE DONOR MEMBER THE FOUNDATION MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE FOUNDATION DIRECTOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO THREE VOTES IN ALL VOTING MATTERS THE DONOR MEMBER HAS THE EXCLUSIVE AUTHORITY TO ELECT THE DONOR CLASS OF THE BOARD OF DIRECTORS AND IS ENTITLED TO TWO VOTES IN ALL VOTING MATTERS								
FORM 990, PART VI, SECTION A, LINE 7A	THE FOUNDATION MEMBER IS ABLE TO ELECT THE FOUNDATION CLASS OF THE BOARD AND THE DONOR MEMBER IS ABLE TO ELECT THE DONOR CLASS OF THE BOARD								
FORM 990, PART VI, SECTION A, LINE 7B	THE DECISIONS OF THE ORGANIZATION ARE SUBJECT TO THE APPROVAL OF THE SEATTLE FOUNDATION								
FORM 990, PART VI, SECTION B, LINE 11	THE ENTIRE BOARD IS PROVIDED A COPY OF THE RETURN PRIOR TO FILING SUFFICIENT TIME IS ALLOWED FOR REVIEW AND QUESTIONS BEFORE THE RETURN IS FILED THE FOUNDATION MEMBER IS DESIGNATED TO REVIEW AND SIGN THE RETURN								
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICIES ARE SIGNED YEARLY BY ALL BOARD MEMBERS AND TRUSTEES SEE PROCEDURES FOR COMPLIANCE BELOW A THE SUPPORTING ORGANIZATION MAINTAINS A LIST OF ALL PERSONS AND ENTITIES WHO ARE SUBSTANTIAL CONTRIBUTORS OR DISQUALIFIED PERSONS WITH RESPECT TO THE SUPPORTING ORGANIZATION THE SECRETARY OF THE SUPPORTING ORGANIZATION IS RESPONSIBLE FOR REVIEWING THESE LISTS FOR ACCURACY ON AN ANNUAL BASIS, UPDATING THE LISTS AS NEEDED, AND PROVIDING THE SEATTLE FOUNDATION WITH THESE LISTS AND ALL UPDATES B THE SUPPORTING ORGANIZATION ENSURES THAT PRIOR TO DISTRIBUTION OF ANY FUNDS, AN AGENT OF THE SUPPORTING ORGANIZATION CONFIRMS THAT THE DISTRIBUTION DOES NOT RESULT IN A PROHIBITED DISTRIBUTION UNDER THE CONFLICT OF INTEREST POLICY C ANY PAYMENT BY THE SUPPORTING ORGANIZATION TO A SUBSTANTIAL CONTRIBUTOR, RELATED PERSONS OR ENTITIES THAT IS NOT PROHIBITED BY THE CONFLICT OF INTEREST POLICY MUST BE APPROVED BY THE SEATTLE FOUNDATION'S DIRECTOR OF PHILANTHROPIC SERVICES, OR HIS OR HER DESIGNEE D THE SUPPORTING ORGANIZATION REQUIRES THAT PRIOR TO MAKING ANY PAYMENT OR PROVIDING ANY NON-INCIDENTAL BENEFIT TO A DISQUALIFIED PERSON OTHER THAN A SUBSTANTIAL CONTRIBUTOR OR RELATED PERSON OR ENTITY, SUCH PAYMENT OR BENEFIT MUST BE APPROVED BY THE SUPPORTING ORGANIZATIONS CONFLICT OF INTEREST POLICY								
FORM 990, PART VI, SECTION B, LINE 15A	COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD MEMBERS THEY COMPILED SALARY INFORMATION FOR THE EXECUTIVE DIRECTOR IN A SIMILAR POSITION AND DETERMINED THE AVERAGE SALARY THE BOARD OF DIRECTORS FOR SEATTLE INTERNATIONAL FOUNDATION APPROVED THE SALARY THE OTHER OFFICERS OF THE BOARD ARE UNCOMPENSATED BY SEATTLE INTERNATIONAL FOUNDATION THE LAST COMPENSATION REVIEW OCCURRED IN NOVEMBER 2013								
FORM 990, PART VI, SECTION C, LINE 19	THE SEATTLE FOUNDATION, THE SUPPORTED ORGANIZATION, MAINTAINS COPIES OF THESE DOCUMENTS AND MAKES THEM AVAILABLE FOR INSPECTION DURING REGULAR BUSINESS HOURS AT THE SEATTLE FOUNDATION'S PRINCIPAL OFFICE THE SEATTLE FOUNDATION ALSO COMPLIES WITH ALL REQUESTS (WRITTEN OR VERBAL) FOR COPIES OF THESE DOCUMENTS								

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DLN: 93493219002494

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

20-8350995

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

**Related Organizations and Unrelated Partnerships** ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

SEATTLE INTERNATIONAL FOUNDATION

(Form 990)

<del></del>	3		,	•			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	<b>tions</b> Complete if t tax year.	he organization ar	nswered "Yes" (	on Form 990, P	art IV, line 34 because	ıt had or	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	on Public charity (if section 501)	status (f) Direct controlling (c)(3)) entity	Section (13) co en	ontrolle tity?
See Additional Data Table						Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ı	Cat No 501	35Y	ı	Schedule R (F	orm 990) 2	2013

because it had one or more re	lated organizations tre				-		(g)	1		1		., 1	
(a)  Name, address, and EIN of related organization		related organization domicile (state or entity unrelated, foreign country) excluded from tax under sections 512		Predominant income(related, unrelated, excluded from	edominant Share of total income e included from tax under ctions 512-		( <b>t</b> Disproj r alloca	prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana	j) ral or aging ner?	<b>(k)</b> Percentage ownership	
					511)			Yes	No		Yes	No	
Part IV Identification of Related Or line 34 because it had one or r	ganizations Taxabl	e as a Corpo	ration s a cor	<b>or Trust</b> C poration or	Complete if the trust during	ne organız the tax ye	ation ans ar.	were	d "Yes	" on Form	990,	Part	IV,
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of t Income	otal Share	(g) e of end- year ssets		(h) ercentage wnership	Section (b) continued ent	i) on 512 (13) rolled city?	
ee Additional Data Table	<u> </u>								$\dashv$	 	Yes	1	No

<b>Note.</b> Com	plete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
<b>1</b> During the ta	x year, did the orgranization engage in any of the following transactions with one or n	more related organizations	listed in Parts II-IV?				
<b>a</b> Receipt of	f (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
<b>b</b> Gıft, grant	, or capital contribution to related organization(s)				1b		No
<b>c</b> Gıft, grant	, or capital contribution from related organization(s)				1c	Yes	
<b>d</b> Loans or l	oan guarantees to or for related organization(s)				1d		No
<b>e</b> Loans or l	oan guarantees by related organization(s)				1e		No
<b>f</b> Dividends	from related organization(s)				1f		No
<b>g</b> Sale of as	sets to related organization(s)				1g		No
<b>h</b> Purchase	of assets from related organization(s)				1h		No
i Exchange	of assets with related organization(s)				1i		No
<b>j</b> Lease of fa	acilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> Lease of fa	acılıtıes, equipment, or other assets from related organization(s)				1k 1l		No
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	f paid employees with related organization(s)				10		No
<b>p</b> Reimburse	ement paid to related organization(s) for expenses				<b>1</b> p	Yes	
<b>q</b> Reimburse	ement paid by related organization(s) for expenses				1q		No
<b>r</b> Other tran	sfer of cash or property to related organization(s)				1r		No
<b>s</b> Other tran	nsfer of cash or property from related organization(s)				1s		No
2 If the ansv	wer to any of the above is "Yes," see the instructions for information on who must cor (a)	(b)	<u> </u>	(d)			
	Name of related organization	Transaction type (a-s)	(c) Amount involved	Method of determining amo	ount ir	nvolved	

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) (g) Share of Share of total end-of-ye	(g) Share of end-of-year assets  (h) Disproprtion allocation			(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												]	
												$\Box$	
												$\Box$	
	•												

Schedule R (Form 990) 2013

## Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

## Software ID: Software Version:

**EIN:** 20-8350995

Name: SEATTLE INTERNATIONAL FOUNDATION

Form 990, Schedule R, Part II - Identification of Re		I	(a)	1 (0)	/#\	1 4	<b>~</b> 1
(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))	<b>(f)</b> Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
WAR CONTINUE TO UNDATION	TOTAL CHARTTARIE	14/4	=04(0)(0)		1	Yes	No
(1) THE SEATTLE FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6013536	SERVES CHARITABLE ORGANIZATIONS IN THE GREATER SEATTLE AREA	WA	501(C)(3)	7 	N/A		No
(1) THE BROTMAN FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1996498	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE II	THE SEATTLE FOUNDATION		No
(2) THE DABNEY POINT FUND  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 94-3209929	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE II	THE SEATTLE FOUNDATION		No
(3) THE LUINO AND MARGARET DELL'OSSO FAMILY FUND  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-1873773	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(4) DILLON FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2079177	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(5) GLENHOME TRUST  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6053623	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(6) THE GEORGE P HARDGROVE FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-6061389	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(7) MCKIBBENMERNER FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 13-4290879	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(8) TSF PROPERTIES  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2016094	RECEIVE, HOLD, & DISPOSE OF PROPERTY DONATIONS FOR THE SEATTLE FOUNDATION	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(9) TSF SERVICES  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 91-2008707	SUPPORT GRANTMAKING AND ADMINISTRATIVE ACTIVITIES OF THE SEATTLE FOUNDATION	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(10) WALKER FAMILY FOUNDATION  1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 13-4290882	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No
(11) THE WHITEHORSE FOUNDATION  1200 FIFTH AVENUE SUITE 1300  SEATTLE, WA 98101 94-3101726	GRANTMAKING TO NONPROFITS IN THE GREATER PUGET SOUND COMMUNITY	WA	501(C)(3)	11A-TYPE I	THE SEATTLE FOUNDATION		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (f) (h) (d) (b) (c) (e) (g) Name, address, and EIN of related Share of total (i) Legal Domicile Direct Controlling Share of Percentage Type of entity Primary activity organization ıncome Section 512(b) (C corp, S corp, end-of-year (State or Entity ownership (13) controlled Foreign or trust) assets entity? Country) Yes No MANAGE N/A SRF CHARITABLE TRUST WA Νo 800 FIFTH AVE INVESTMENTS SEATTLE, WA 981043176 91-6059260 REF TRUST FBO THE SEATTLE MANAGE WA N/A Νo INVESTMENTS FOUNDATION 1301 FIFTH AVE FLR 24 SEATTLE, WA 98101 91-6027079 N/A MEF TRUST FBO THE SEATTLE MANAGE WA Νo FOUNDATION INVESTMENTS 1301 FIFTH AVE FLR 24 SEATTLE, WA 98101 91-6027080 DMH CHARITABLE TRUST FBO MANAGE WA N/A Νo INVESTMENTS SEATTLE FOUNDATION 999 THIRD AVE STE 4000 SEATTLE, WA 98104 91-6023538 HP CHARITABLE TRUST FBO THE MANAGE WA N/A Νo INVESTMENTS SEATTLE FOUNDATION 999 THIRD AVE STE 4000 SEATTLE, WA 98104 91-6023566 RDS TRUST FBO SEATTLE MANAGE WA N/A Nο FOUNDATION INVESTMENTS 800 FIFTH AVE SEATTLE, WA 981043176 91-6300139 N/A AWW TRUST FBO SEATTLE MANAGE WA Νo FOUNDATION INVESTMENTS 800 FIFTH AVE SEATTLE, WA 981043176 91-1034032 CHARITABLE REMAINDER TRUSTS MANAGE N/A WA Νo (19)INVESTMENTS 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101 CHARITABLE LEAD TRUSTS (1) MANAGE WA N/A Νo INVESTMENTS 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101