Form **990** 

# **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

DLN: 93493318079738 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

Open to Public Inspection

A Fo	or the	2017 ca	alendar year, or tax year beginr	ning 07-01-2017 ,and ending 06-	-30-201	.8			
	ck if app		C Name of organization Unitarian Universalist Service				D Employ	er identif	ication number
	dress ch me char	-	Committee Inc				04-618	6012	
	al retu	_	Doing business as						
		terminated	Number and street (or D.C. hours	Il is not delivered to street address) Room/	/ <del>-</del> -		E Telephor	ne number	
	ended r olication	return n pending	689 Massachusetts Avenue	ii is not delivered to street address;   Room/	suite		(617) 8	68-6600	
			City or town, state or province, count Cambridge, MA 02139	ry, and ZIP or foreign postal code			<b>G</b> Gross re	ceints \$ 1	2.657.853
			F Name and address of principal	officer	H/a	) To th	nis a group re	•	
			Mary Katherine Morn		"("		ordinates?	turri ioi	□Yes ☑No
			689 Massachusetts Avenue Cambridge, MA 02139		Н(ь	) Are	all subordinat	tes	☐ Yes ☐No
Тах	-exemp	ot status		nsert no ) 4947(a)(1) or 527			uded? No," attach a l	list (see	
W	ebsite	:► wwv	w uusc org	15 May(2) 01	Н(с		up exemption		·
<b>(</b> Form	n of orga	anızatıon	✓ Corporation ☐ Trust ☐ Assoc	nation ☐ Other ►	L Yea	r of for	mation 1948	<b>M</b> State	of legal domicile
		•						I'IA	
Pa		Sumi	<b>mary</b> cribe the organization's mission or	most significant activities					
		ee Sched		most significant activities					
IIC	_								
na L	_								
GOVERNANCE	<b>3</b> C	heck thi	s hox • I if the organization disc	ontinued its operations or disposed of	f more th	nan 25	% of its net a	ssets	
5				body (Part VI, line 1a)				3	14
ĕ	<b>4</b> N	lumber d	of independent voting members of t	the governing body (Part VI, line 1b)				4	14
ACHVINES &			, •	endar year 2017 (Part V, line 2a)				5	46
Ĭ			, ,	essary)				6	915
ואַכו			·	VIII, column (C), line 12		•		7a	28,123
`				Form 990-T, line 34		•	•	7b	6,538
	יו ט	iet unien	ated business taxable income nom	Form 990-1, mie 54	<del></del>	· ·	rior Year	1,0	Current Year
	•	٠ه ا	and amounts (Don't VIII June 11)					074	
Š			ions and grants (Part VIII, line 1h)		_		7,674,0		8,042,732
Rəvenue		_	service revenue (Part VIII, line 2g)		_		209,4		180,653
ç			nt income (Part VIII, column (A), I	•			862,0		479,533
			enue (Part VIII, column (A), lines !				98,0		111,989
				t equal Part VIII, column (A), line 12)			8,844,8		8,814,907
			nd sımılar amounts paıd (Part IX, co	• • •			1,648,0	615	1,687,281
			paid to or for members (Part IX, co					0	0
æ				nefits (Part IX, column (A), lines 5–10)	)		4,859,0	679	4,531,431
Expenses	<b>16</b> a F	Professio	nal fundraising fees (Part IX, colum	nn (A), line 11e)			122,:	160	200,438
ďx	b⊤	otal fundr	aising expenses (Part IX, column (D), lin	ie 25) ▶965,194					
ш	<b>17</b> C	ther exp	penses (Part IX, column (A), lines 1	l1a-11d, 11f-24e)			2,904,0	045	3,124,897
	18 T	otal exp	enses Add lines 13–17 (must equa	al Part IX, column (A), line 25)			9,534,4	499	9,544,047
	<b>19</b> R	levenue	less expenses Subtract line 18 fro	m line 12			-689,	658	-729,140
Net Assets of Fund Balances					Ве	eginnın	ng of Current Y	'ear	End of Year
SS 6	20 ⊤	otal asse	ets (Part X, line 16)				30,115,	350	29,650,107
절	<b>21</b> T	otal liabi	ılıtıes (Part X, lıne 26)				4,434,	453	4,275,047
žZ	<b>22</b> N	let asset	s or fund balances Subtract line 2	1 from line 20			25,680,8	897	25,375,060
Par	t II	Signa	ature Block						
				ned this return, including accompanying					
	eage a nowled		r, it is true, correct, and complete	Declaration of preparer (other than of	mcer) is	based	on all inform	ation of v	wnich preparer has
,									
		* * * * * *	re of officer				018-11-14 ate		
Sign		. Signatu	are of officer			D	ale		
lere			avidson VP & CAO						
		<u>/</u>	r print name and title	T					
_	_		rınt/Type preparer's name renda L Booth	Preparer's signature Brenda L Booth	Date 2018-11	<sub>-14</sub> C		PTIN P0134239	5
Paic						Se	elf-employed		
Prep	oarei	<u> </u>	irm's name CBIZ MHM LLC	ırm's EIN ▶ 26-					
Jse	Only	y   <sup>⊦</sup> '	rm's address ► 500 Boylston Street				hone no (617)	/61-0600	
			Boston, MA 02116						
1ay tl	ne IRS	discuss	this return with the preparer show	n above? (see instructions)				$ \mathbf{\nabla} \mathbf{V} $	ſes □No
or P	aperw	ork Red	duction Act Notice, see the sepa	rate instructions.	C	at No	11282Y		Form <b>990</b> (2017)

Form	1 990 (2	017)					Page <b>2</b>						
Pai	t III	Statement of	of Program Servic	e Accomplis	hments								
		Check If Sched	ule O contains a respo	nse or note to	any line in this Part III		🗹						
1	Briefly	describe the or	ganızatıon's mıssıon										
		ces human right pressive policies		ound the world,	partnering with those w	vho confront unjust power structure	es and mobilizing to						
2	Dıd th	e organization u	ındertake any sıgnıfıca	nt program ser	vices during the year wh	nich were not listed on							
	the pr	or Form 990 or	990-EZ?				🗌 Yes 🗹 No						
	If "Yes	s," describe thes	se new services on Sch	edule O									
3	Did th	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	service			 e0			☐ Yes 🗹 No						
4	Descri Sectio	<i>,</i> be the organiza n 501(c)(3) and	tion's program service	accomplishmer	to report the amount of	argest program services, as measu f grants and allocations to others, t							
4a	(Code		) (Expenses \$	4,670,831	including grants of \$	1,233,821 ) (Revenue \$	83,847 )						
	See Ad	dıtıonal Data											
4b	(Code	ditional Data	) (Expenses \$	1,770,148	including grants of \$	337,277 ) (Revenue \$	31,708 )						
		altional Bata											
4c	(Code		) (Expenses \$	758,049	ıncludıng grants of \$	9,929 ) (Revenue \$	113,975 )						
	See Ad	ditional Data											
	(Code		) (Expenses \$	557,656	including grants of \$	106,254 ) (Revenue \$	9,989 )						
	communicommunicommunicommunicommunicommunicommunicommunicompetation concertinicommunicompetation concertinicompetation concertinicom	unities more welconnities, and to deep in the same of	ming through efforts to adpen our relationships in the ty Workers Alliance (RCW, a able to deliver leadership or instance, on October 23 cy Council In Missouri, the infined animal feeding oper e to stand up against abus Milan, for instance, a grouhile working, one worker fight, he felt empowered or in process Working in Moto express the concerns of oprovide a safe city for infor the media to raise aw igton, D C, to protest outstable to meet with Carmen lese and other actions, the	lvance worker and ese communities, A), and Make the of development trainer, GMWC defeate Rural Community rations (CAFOs) in ses and mistreatm pof workers was from Honduras appand proceeded to onet, Missouri, UU: the local immigrations Last year areness about the side the USDA and Rottenberg, Acting petition was final apparences and proceeded to present the side the USDA and Rottenberg, Acting petition was final and make the USDA and petition was final and make the use of the petition was final and make the use of the	Immigrant rights. This year UUSC staff conducted its fire Road Pennsylvania (MRPA) I nings, conduct cross-cultural an attempt to ban refuger Workers Alliance (RCWA) in ortheast Missouri, helping ent and request from their eable to organize and succesoroached RCWA indicating the file his case. As a result, all SC's long-time partner, the lint community and to demain, following a proposal from dangers of line speed and N I demand they reject the pelg Deputy Under Secretary for	in supporting our worker center partners in the sassess the progress our partners have stitle visits to our partners, Greater Minin in Minnesota, for example, our partner the il meetings, and push back against the these coming to St. Cloud by passing the "Juas supported immigrant and refugee work these workers learn about worker and interplayers an increase in wages and bette sfully pushback against shifts over eight that he was afraid to file his worker's comport his medical expenses and lost wages worker Justice Center and their protection, not deportation. The state Chicken Council to increase line specification. The state of the USDA demartition. The first poul to the control of the specification of the specific poul to the control of the control of the specific poul to the control of the control of the specific poul to the control of the control of the specific poul to the control of the control o	ve made in their nesota Worker Center ie Greater Minnesota Worker ireats facing the ist and Welcoming City" kers in the pork processing nmigration rights. In two er safety equipment. In the hours on Saturdays. After pensation case. After were paid and monetary er (NWAWIC), organized a Sheriff listened to their ed, workers supported by nding it reject the petition ogers Committee and and to demand she reject						

106,254 ) (Revenue \$

9,989)

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557,656

including grants of \$

7,756,684

Other program services (Describe in Schedule O )

Total program service expenses ▶

4d

4e

(Expenses \$

**Checklist of Required Schedules** 

Yes

1

2

Page 3

No

Nο

No

Nο

No

No

Nο

Νo

No

Nο

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11c

11d

11e

11f

12a

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14a

14b

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Yes

Yes

Yes

Yes

Yes

Yes

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸 . . .

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

**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 . . . . . . . . . . . . .

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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				_
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals 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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24-	Did the expansive have a tay exempt hand requering with an outstanding principal amount of more than \$100,000 as of			

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 

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 🔀

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . \*\* Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

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?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Yes 24a

Page 4

Nο Nο

No

Nο

Νo

Νo

Νo

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Νo

24b 24c 24d 25a 25b

26

27

28a

28b

28c

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30

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32

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34

35a

35b

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37

38

Yes

Yes

Yes

Yes

Yes

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orm	990 (2017)			Page <b>5</b>
Par	t 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			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 52			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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>L</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
U	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a	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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
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
		50		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
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 )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No' 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Se	ction	A. Governing Body and Management			
				Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year 14			
	If the	re are material differences in voting rights among members of the governing			
		or if the governing body delegated broad authority to an executive committee or ir committee, explain in Schedule O			
b		the number of voting members included in line 1a, above, who are independent			
_		<b>1b</b> 14			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee?	2		No
3		ne organization delegate control over management duties customarily performed by or under the direct supervision cers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did th	ne organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did th	ne organization have members or stockholders?	6		No
7a		ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more			NI-
h		pers of the governing body?	7a 7b		No No
U		ns other than the governing body?	′		NO
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by illowing			
а	The g	overning body?	8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se		B. Policies (This Section B requests information about policies not required by the Internal Revenue			
				Yes	No
10a	Did th	ne organization have local chapters, branches, or affiliates?	10a		No
b		s," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ranches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has th	he organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a	Yes	
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes	
c		ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?	13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?	14	Yes	
15		ne process for determining compensation of the following persons include a review and approval by independent ns, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The o	rganization's CEO, Executive Director, or top management official	15a	Yes	
b		officers or key employees of the organization	15b	Yes	
		s" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	taxab	ne organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a le entity during the year?	16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the organization to evaluate its participation it venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt swith respect to such arrangements?	16b		
		C. Disclosure			
17	List th	ne States with which a copy of this Form 990 is required to be filed CA , CO , CT , DC , FL , GA , HI , IL , IN , k , MA , MI , MN , NH , NJ , NM , NY , NC , OI SC , TN , UT , VA , WA , WV , WI , AL , AK	⊣ , ок	, OR , P	PA, RI,
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) ible for public inspection. Indicate how you made these available. Check all that apply		,	
	<b>2</b> c	Own website Another's website 🗹 Upon request 🔲 Other (explain in Schedule O)			
19	Descr	ibe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	State	, and financial statements available to the public during the tax year the name, address, and telephone number of the person who possesses the organization's books and records of Cahalane - UUSC 689 Massachusetts Avenue - Cambridge, MA 02139 (617) 301-4331			

orm 990 (2	017)										Page <b>7</b>
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's <b>current</b> off tion Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's <b>current</b> key		•								
vho received organization	organization's five <b>current</b> high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's <b>former</b> office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's <b>former dire</b> , more than \$10,000 of reportab	ectors or trust le compensation	<b>ees</b> that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2017) Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

علانكما	Section A. Officers, Direct	Jois, Hustees	" VEY	<u> zmp</u> i	Joye	es,	anu r	<u>nigi</u>	Test compensate	Turnibloyees (co	11011	-iueu/	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	verage Position (do not check more than one box, unless person leek (list list both an officer and a director/trustee) o						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	.   '	(F) Estima amount of compens from t	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		organizatio relate organiza	ed
See /	Addıtıonal Data Table			$\vdash$	$\vdash$	$\vdash$	_	$\vdash$	<u> </u>		+		
·		<del>                                     </del>	<b>—</b>	<del>                                     </del>	+-	+-	+	+	<del>                                     </del>		+		
				<del>                                     </del>	<del>     </del>		+-	-	<u> </u>		+		
								$\Box$			$\perp$		
		!	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	⊥_'	<u> </u>		$\perp$		
		!	<u> </u>	'	'		<u> </u>	<u></u>	<u> </u>		$\perp$		
								'					
							<u> </u>	[_'					
									'				
		†			$\top$				<u> </u>		$\top$		
	Sub-Total		 on A .	· .			<b>*</b>	<u>—</u>			_		
	Fotal (add lines 1b and 1c)	•		<u></u>			▶		1,512,088	0			253,817
2	Total number of individuals (including of reportable compensation from the o			e liste	ed a	bove	e) who	, rece	eived more than \$10	30,000			
											$\Box$	Yes	No
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>						loyee, c	_	-	· · ·	3	Yes	
4	For any individual listed on line 1a, is organization and related organizations individual										4	Yes	
5	Did any person listed on line 1a receiv								-	ıvıdual for	5		No
Se	ection B. Independent Contract	ors			_	_		_			_		
1	Complete this table for your five higher										ensa	ation	

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

(A)

Name and business address

Grassroots Solutions

861 East Hennepin Ave Suite 350 Minneapolis, MN 55414

compensation from the organization  $\blacktriangleright$  1

**(C)** Compensation

Form 990 (2017)

220,703

(B)

Description of services

Strategic Planning

Part			Revenue								rage 3
				a respo	onse or note to an	y line in t	hıs Part VIII				🗆
							(A) revenue	Rela exe fun	B) ted or empt ction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	a Federated campaigi	ns	1a	43,190			rev	enue		512-514
nts		<b>b</b> Membership dues									
Gra	١,	<b>c</b> Fundraising events		1c							
\$ \ <u>\ \</u>	١,	<b>d</b> Related organizatio	ns	1d							
<u> </u>	۱,	e Government grants (co	ontributions)	1e							
ns, Sim	1	f All other contributions,									
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included	1f	7,999,542						
ē S		g Noncash contribution in lines 1a-1f \$		315,	073						
Contand	l h	Total.Add lines 1a-1									
	۳				Busines		3,042,732				
Program Service Revenue	2a	Participant Fees Learnin	a Trips			624200	18	30,653	180,	653	+
4 <u>₹</u>	Ь		3 ····F-						-		
<u>د</u>	C										
ξ	d	I		_							
an (	e			_							+
ogr.	f	All other program se	rvice revenue	!	L	180,653					
<u>~</u>	g	Total.Add lines 2a-2f	·	•	<u> </u>						
		Investment income (ir similar amounts) .			interest, and other	•	193,496				193,496
	l	Income from investme			ond proceeds	<b>▶</b>					
	5	Royalties				<u> </u>					
	6-	Cross ropts	(ı) Rea	I	(II) Personal						
	oa	Gross rents	4	144,923							
	ь	Less rental expenses	3	374,977							
	c	Rental income or		69,946							
	_	(loss)				_	69,946		46.022	20.422	25.000
	٥	Net rental income of	r (loss) (i) Securi		(II) Other		09,940		16,823	28,123	25,000
	7a	Gross amount from sales of assets other than inventory	, ,	10,313							
	Ь	Less cost or other basis and sales expenses		124,276							
	l	Gain or (loss)		86,037		_	206.027				286,037
		I Net gain or (loss) . Gross income from fo			<b>•</b>	_	286,037				286,037
Other Revenue		(not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of							
æ	l	Less direct expenses		b							
thei		: Net income or (loss) I Gross income from g			ents •	7					
ō		See Part IV, line 19			J						
	<u> </u>	Less direct expenses		a							
	l	: Net income or (loss)		<b>b</b> activit	les						
		Gross sales of invent	ory, less								
		returns and allowand	es	a	76,32	6					
	Ь	Less cost of goods s	sold	b		_					
		Net income or (loss)		ا invent <sup>:</sup>	ory <b>&gt;</b>		32,633		32,633		
		Miscellaneous	Revenue		Business Code						
	11	- <b>a</b> Mıscellaneous Rever	nue		90009	99	9,410		9,410		
	b	•									
	C										
		4 All -41									
		I All other revenue .  Total. Add lines 11a	 -11d			+					
		? Total revenue. See					9,410				
		o.a. re <b>venue.</b> 566	anadi actions	-	• • • •		8,814,907		239,519	28,123	504,533 Form <b>990</b> (2017)

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses	-L All -kl		l-t (A)	
Section 501(c)(3) and 501(c)(4) organizations must complete all co	5	inizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			<del>, </del>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	756,897	756,897		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	930,384	930,384		
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	909,356	699,015	172,911	37,430
<b>6</b> 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	2,658,242	2,220,190	346,519	91,533
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	220,684	179,105	27,954	13,625
9 Other employee benefits	566,592	540,125	25,374	1,093
<b>10</b> Payroll taxes	176,557	146,276	17,949	12,332
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	13,728		13,728	
<b>c</b> Accounting	52,600		52,600	
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17	200,438			200,438
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	823,045	777,193		45,852
12 Advertising and promotion	118,859	118,859		
13 Office expenses				
<b>14</b> Information technology	101,437	57,958	16,675	26,804

148,688

557,896

63,227

205,998

58,036

410,191

306,507

27,512

22,906

214,267

9,544,047

80,817

372,407

38,409

130,423

35,440

366,480

260,472

10,403

13,438

22,393

7,756,684

28,039

10,069

9,927

30,230

9,038

76

982

2,831

5,115

52,152

822,169

39,832

175,420

14,891

45,345

13,558

43,635

45,053

14,278

4,353

139,722

965,194

Form 990 (2017)

	key employees			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$			
7	Other salaries and wages	2,658,242	2,220,190	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	220,684	179,105	

15 Royalties .

**16** Occupancy

**20** Interest . . .

23 Insurance .

c Telephone

d Supplies

21 Payments to affiliates . . .

expenses on Schedule O )

a Printing & Publications

b Postage & Shipping

e All other expenses

22 Depreciation, depletion, and amortization

18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings

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

25 Total functional expenses. Add lines 1 through 24e 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)

**17** Travel .

11

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17

18

19

20

21

23

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34

Liabilities 22

Fund Balances

Assets or 30

Net

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Intangible assets . . . . .

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11 . . .

Investments—program-related See Part IV, line 11 .

Other assets See Part IV, line 11 . . . . .

Tax-exempt bond liabilities . . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . . .

Retained earnings, endowment, accumulated income, or other funds

Paid-in or capital surplus, or land, building or equipment fund . . .

**Total assets.**Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

8,784,372

2.749.165

235.325

5.849.996

9.660.576

4.376.287

119,340

867.473

2,669,424

125 000

772.556

4,434,453

13.683.840

6.936.923

5.060.134

25,680,897

30.115.350

30,115,350

9

10c

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22 23

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33

34

Page **11** 

200.043

6,035,207

10.617.653

4.324.731

49.165

29,650,107

863,431

2,575,323

125.000

711.293

4,275,047

14,772,295

5,028,431

5.574.334

25,375,060

29.650.107

Form **990** (2017)

	Check if Schedule O contains a response or note to any line in this Part IX $$ .			<u> </u>
		(A) Beginning of year		<b>(B)</b> End of year
1	Cash-non-interest-bearing	1,464,189	1	825,86

5.172.381 Savings and temporary cash investments . . . 5,258,715 2 2,791,831 1,987,810 3 Pledges and grants receivable, net . . 3 201,486 4 297,201 Accounts receivable, net . Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L . . . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and

contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 157.605 Notes and loans receivable, net . . 140.054 Inventories for sale or use . 8

10a

10b

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12** 

-87,569

25,375,060

No

Nο

No

Form **990** (2017)

Yes

Yes

Yes

2a

2b

2c

3a

3b

9

•	Revenue less expenses Subtract line 2 from line 1		
1	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	
5	Donated services and use of facilities	6	
,	Investment evappes	7	

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

Other changes in net assets or fund balances (explain in Schedule 0) . . . . . . . .

**Financial Statements and Reporting** 

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

4	Net assets of fund balances at beginning of year (must equal rait A, line 33, column (A))	-	
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	

## **Additional Data**



Software ID:

**EIN:** 04-6186012 Name: Unitarian Universalist Service Committee Inc.

Form 990 (2017)

Form 990, Part III, Line 4a:

Human Rights Programs - I Rights At Risk See Schedule O

#### Form 990, Part III, Line 4b: Human Rights Programs - II Environmental & Climate Action See Schedule O

### Form 990, Part III, Line 4c:

Human Rights Programs - III UU College of Social Justice See Schedule O

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation

0

0

0

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

and Independent Contractors

Lydia Mercedes Lopez

Board Member

Board Member

Board Member

Joseph Parsons

Board Member

Lyssa Jenkens

Hope Johnson

Board Member

Chair

Karen Kell Hartman

......

Peter Fenn

	any hours	and	a dır	ecto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
Sarah K Dreier Board Member	1 00	×						0	0	0
Brock Leach Vice-Chair	1 00	x		х				0	0	0
Danah Fisher Secretary	1 00	x		х				0	0	0
Todd Hess Treasurer	1 00	х		х				0	0	0

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation

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

	any hours					ustee)		organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Ramanujachary Kumanduri Board Member	1 00	×						0	0	0
Cynthia Totten Board Member	1 00	×						0	0	0
Lachonne Walton Board Member	1 00	x						0	0	0
Ned Wight Board Member	1 00	×						0	0	0
				-	$\overline{}$					

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320,213

163,174

161,236

154,828

34,233

13,831

20,489

41,351

1 00

40 00

40 00

35 00

35 00

35 00

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Board Member
Ned Wight
Board Member
Nathan Alan Hollister
Board Member

Thomas H Andrews

Mary Katherine Morn

President & CEO

Rachel Freed

Mack Davidson

Cassandra Ryan

VP & CPO

VP & CAO

VP & CDO

President & CEO (until 11-17)

......

and Independent Contractors

and Independent Contractors (A) Name and Title

Kathleen McTique

Director of UUCSJ

Director of Human Resource

Danielle Fuller - Wimbush

Quang Nguyen

Dir of Programs

Michael Kourahas

Carol Cahalane

Dir of Finance

William Schulz

Former President/President Emeritus

Ass Dir

below dotte line)
35
35
35

organizations below dotted line)	
35 00	
35 00	Г
35 00	Г
35 00	
	ı

35 00

10 00

(B)

Average

hours per

week (list

any hours

for related

				office ustee)	
Individual trustee	Institutional Trustee	Officer	Key employee	Highest compensated employee	1 (01.018)
				Х	
				Х	
				х	
				х	

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

(C)

Position (do not check more

than one box, unless

(D)

Reportable

compensation

from the

organization

(W-2/1099-

MISC)

135,927

127,778

116,384

107,636

123,754

101,158

Former

Х

(E)

Reportable

compensation

from related

organizations

(W-2/1099-

MISC)

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

39,413

20,736

26,617

25,615

12.028

19,504

efil	e GR	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493318079738
SC	HED m 99	ULE A		Public (	Charity Staturganization is a sect	ion 501(c)(3) o empt charitable	organization or trust.	ort	2017
Depar	tment of	f the Treasury	▶ Inf	ormation abou	► Attach to Form It Schedule A (Form	990 or 990-EZ		ictions is at	Open to Public
Interna	al Rever	nie Service he organiza	tion		<u>www.irs.g</u>	ov/form990.		Employer identific	Inspection ation number
	ıan Unı nittee Ir	versalist Servic nc	е					04-6186012	
	rt I				<b>us</b> (All organization				
	organız				it is (For lines 1 thro				
1		A church, c	onvention of	churches, or as	sociation of churches	described in <b>sec</b> t	tion 170(b)(1)	(A)(i).	
2		A school de	scribed in <b>se</b>	ection 170(b)(	<b>1)(A)(ii).</b> (Attach Sch	nedule E (Form 9	90 or 990-EZ) )		
3		A hospital o	or a cooperat	ive hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4			esearch orga and state _	inization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6		•	•	-	governmental unit de				
7	✓			rmally receives <b>(vi).</b> (Complete	a substantial part of it Part II )	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	rıbed ın <b>sectior</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	o its exempt fur unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	- '
11		An organiza	ition organiz	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	l organizations (	dexclusively for the be described in <b>section 5</b> the type of supporting	<b>i09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	
a		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organiz	zation(s), typically by	giving the supported nization <b>You must</b>
b		Type II. A manageme	supporting on t of the sup	organization sup porting organiza	ervised or controlled i ation vested in the sar				
C		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	nally integrate The organizatio	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	, <i>,</i>
e		Check this	box if the org	ganization recei	ved a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Ento			non-functionally d organizations	integrated supporting	organization			
g .				-	ipported organization(	(c)			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organic in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota		l. D!	Linn A - 1 B/ 1	tice, see the I		Cat No 11285		 Schedule A (Form 9	<u> </u>

Page 2

	(b)(1)(A)(ix)	sadead the how or	. l.no. F. 7. 9. o	O of Down I on if i	<b>.</b>	s failed to air	alifi mdaw Dawk
	(Complete only if you ch III. If the organization fo						ality under Part
	Section A. Public Support	ans to quality and	ici the tests liste	ed Below, piedse	complete rule	111./	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(B) 2014	(6) 2013	(d) 2016	(e) 2017	(1) Total
1	Gifts, grants, contributions, and	11,648,469	10,459,122	8,141,734	7,674,074	8,042,64	45,966,04
	membership fees received (Do not include any "unusual grant")	11,040,403	10,439,122	0,141,734	7,074,074	8,042,05	45,900,04
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	11,648,469	10,459,122	8,141,734	7,674,074	8,042,64	12 45,966,04
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						4,355,96
	line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5						11 610 00
	from line 4						41,610,08
	Section B. Total Support						
	Calendar year	(a)2013	<b>(b)</b> 2014	(c)2015	<b>(d)</b> 2016	(e)2017	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	11,648,469	10,459,122	8,141,734	7,674,074	8,042,64	<b>1</b> 2 45,966,04
8	Gross income from interest,	11,010,103	10,133,122	0,111,731	7,071,071	0,012,0	13,300,01
Ü	dividends, payments received on	247,583	220,047	257,222	303,624	218,40	1,246,88
	securities loans, rents, royalties and	247,363	220,047	257,222	303,624	210,40	1,240,00
_	Income from similar sources						
9	Net income from unrelated business activities, whether or not the	22,854	33,184	18,501	20,116	28,12	122,77
	business is regularly carried on	22,031	33,101	10,501	20,110	20,11	.5
10	Other income Do not include gain						
	or loss from the sale of capital						
11	assets (Explain in Part VI ) <b>Total support.</b> Add lines 7 through						
	10						47,335,70
12	Gross receipts from related activities,	etc (see instruction	ns)			12	1,324,63
13	First five years. If the Form 990 is for	or the organization's	s first, second, thir	d, fourth, or fifth t	ax vear as a secti	on 501(c)(3) o	rganization,
	check this box and <b>stop here</b>						_
_	Section C. Computation of Publi						
	Public support percentage for 2017 (III	• •	•	lumn (f))		14	87 900 9
	Public support percentage for 2016 Sc			(.,,		15	87 730 9
	33 1/3% support test—2017. If the			n line 13, and line	14 is 33 1/3% or		
104					11.13.33 1,370 01	more, erreek en	▶ ☑
L	and <b>stop here.</b> The organization qual  33 1/3% support test—2016. If th				nd line 15 is 33 1/	3% or more ch	
		-		•	14 11116 13 13 33 17.	3 70 OF HIOTE, CI	<b>▶</b> □
17.	box and stop here. The organization 10%-facts-and-circumstances tes				13 16a or 16b	and line 14	
1/6	is 10% or more, and if the organization						
	in Part VI how the organization meets						
	organization						▶ □
ь							
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization	in meets the Tacts	-and-circumstances	s test The organi	zation qualifies as	a publicly	, n
	supported organization						▶□

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI )						
13	Total support. (Add lines 9, 10c,						
14	11, and 12)  First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and <b>stop here</b>			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18	
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the						
	determination 3						
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use						
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below						
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						

				3.	
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use				
		3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below				
b	<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$		
	supervised by or in connection with its supported organizations	4b			
С					
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	$\overline{}$		
	(-), (-), (-), (-), (-), (-), (-), (-),				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and				

			, ,	
4a	· · · · · · · · · · · · · · · · · · ·			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
С	Did the organization support any foreign supported organizations that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
5a	(c) below (if applicable) Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations				
			Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year				
_		1			
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization				
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
		1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3			
s	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  The organization satisfied the Activities Test. Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a			
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in <b>Part VI.</b></i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

**10** Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
<b>b</b> From 2013		
c From 2014		
<b>d</b> From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2017 distributable amount		
<ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul>		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u>      \$                              </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015. . . . .

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

### Additional Data

#### Software ID: Software Version:

**EIN:** 04-6186012

Name: Unitarian Universalist Service

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Committee Inc.

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493318079738

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

Inspection

• 5	Section 527 organizations Complet	te Part I-A only					_	
		n Form 990, Part IV, Line 4, or Form 9						D
		t have filed Form 5768 (election under s t have NOT filed Form 5768 (election ur						
		n Form 990, Part IV, Line 5 (Proxy Tax						
Pro	xy Tax) (see separate instruction	s), then	,, ,		,		,	
	Section 501(c)(4), (5), or (6) organiz	zations Complete Part III			F	L:6:	*:	
	me of the organization tarian Universalist Service				Employer id	entiii	cation nun	nber
Con	nmittee Inc				04-6186012			
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a sectio	n 527 orgai	nizat	ion.	
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political can	npaign activities ir	n Part IV (s	see instruction	s for c	definition of	
2	Political campaign activity expend	litures (see instructions)			<b>&gt;</b>	\$_		
3	Volunteer hours for political camp	eaign activities (see instructions)				_		
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise to	ax incurred by the organization under se	ection 4955		<b>&gt;</b>	\$_		
2	Enter the amount of any excise to	ax incurred by organization managers ui	nder section 4955		<b>&gt;</b>	\$ _		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	hıs year?				☐ Yes	☐ No
4a	Was a correction made?						☐ Yes	□ No
	If "Yes," describe in Part IV							
Par	t I-C Complete if the orga	nization is exempt under sectio	n 501(c), exc	ept secti	on 501(c)(3	3).		
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	tion activiti	es 🕨	\$ <u>_</u>		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other o	rganizations for se	ection 527	exempt •	\$_		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	lıne 17b	<b>&gt;</b>	\$		
4	Did the filing organization file For	m 1120-POL for this year?				_	☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	e filing orga political org	anızatıon's fund anızatıon, sucl	ds Als	so enter the	
	(a) Name	( <b>b)</b> Address	(c) EIN	filing o	ount paid from organization's If none, enter -0-	c	e) Amount contributions and promp directly deliv separate p organization	s received otly and vered to a political
							enter ·	-0-
,								
3								
1								
5								
5								
or P	aperwork Reduction Act Notice, see i	the instructions for Form 990 or 990-EZ.	Cat	No 500849	S Schedule (	C (For	m 990 or 991	0-EZ) 2017

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
Not over \$500,000	20% of the amount on line 1e				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000				
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
Over \$17,000,000	\$1,000,000				
Current waste while a second (and a 25% of lane 16)			144.726		
Grassroots nontaxable amount (enter 25% of line 1f)	)		144,736		
Subtract line 1g from line 1a If zero or less, enter -0	)-		0		
Subtract line 1f from line 1c If zero or less, enter -0-		0			
If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting					

Lobbying Expenditures During 4-Year Averaging Period

565,075

112,075

141,269

35,508

**(b)** 2015

607,970

110,210

151,993

48,854

(c) 2016

587,746

91,589

146,937

32,684

(d) 2017

578,943

42,585

144,736

30,269

Schedule C (Form 990 or 990-EZ) 2017

(e) Total

2,339,734

3,509,601

356,459

584,935

877,403

147,315

(a) 2014

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

Schedule C (Form 990 or 990-EZ) 2017

Return Reference

activity

(b)

Amount

(a)

No

Yes

#### During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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## **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

Open to Public

DLN: 93493318079738 OMB No 1545-0047

(Form 990)

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization **Employer identification number** Unitarian Universalist Service Committee Inc 04-6186012 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

	Organizations Maintaining Co	Directions of Art, n	15(0)	icai ii	cas	ures, or	Other	Jillillai A	33CL3 (C	onunuec	1)
3	Using the organization's acquisition, accessi items (check all that apply)	on, and other records,		any of	the f	ollowing t	hat are a	a significant i	use of its	collectio	n
а	Public exhibition		d		Loai	n or excha	ange pro	grams			
b	Scholarly research		е		Oth	er					
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and explain h	now the	ey furth	ner th	ne organiz	ation's e	exempt purpo	se in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							nılar	☐ Yes	. N	No
Dai	rt IV Escrow and Custodial Arrang	aments								<u> </u>	110
	Complete if the organization and X, line 21.		n 990	), Part	IV,	line 9, oi	report	ed an amoi	unt on F	orm 99	0, Part
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?	dian or other intermedi	ary for	· contril	outio	ns or othe	er assets	not	☐ Ye	s 🗆	No
ь	If "Yes," explain the arrangement in Part XI	II and complete the fol	lowing	table				Δ	mount		
С	Beginning balance						1c				
d	Additions during the year					l	1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
<b>2</b> a	Did the organization include an amount on I	Form 990, Part X, line 2	21, for	escrow	or c	ustodial a	ccount l	ability?	☐ Ye	s 🗆	No No
b	If "Yes," explain the arrangement in Part XI	II Check here if the ex	planat	ion has	bee	n provided	d in Part	XIII		. С	
Pa	art V Endowment Funds. Complete										
		(a)Current year		rior yea	_			(d)Three ye		(e)Four y	ears back
1a	Beginning of year balance	12,738,655		11,970	$\overline{}$		2,188,32		,281,318		10,499,666
b	Contributions	2,005,427		725	,857		821,15	2 1	,958,663		975,621
С	Net investment earnings, gains, and losses	1,046,381		1,672	,031		286,42	5	291,125		1,669,719
	Grants or scholarships										
	Other expenditures for facilities										
	and programs	1,170,730		1,542	,957		1,252,49	1	,267,921		1,799,825
f	Administrative expenses	80,501		86	,834		72,84	3	74,859		63,863
g	End of year balance	14,539,232		12,738	,655	1	1,970,55	12	,188,326		11,281,318
2	Provide the estimated percentage of the cur	rent year end balance	(line 1	g, colu	mn (a	a)) held a	s				
а	Board designated or quasi-endowment <b>&gt;</b>	55 980 %									
b	Permanent endowment ► 38 340 %										
С	Temporarily restricted endowment ▶ 5	680 %									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%									
3a	Are there endowment funds not in the posse	ession of the organizati	on tha	t are h	eld a	nd admını	stered fo	or the			
	organization by								_	Ye	
	(i) unrelated organizations			•						(i)	No
Ь	(ii) related organizations	no listed as required a	n Cobo	e e	•					(ii) Ib	No
4	Describe in Part XIII the intended uses of the	·			•				ئا	יטי	
	rt VI Land, Buildings, and Equipme										
ч	Complete if the organization and		n 990	), Part	IV,	lıne 11a.	See Fo	rm 990, Pa	art X, lin	e 10.	
	Description of property (a) Cost or of (investry	other basis (b) Cost						depreciation		<b>d)</b> Book v	alue
1a	Land			97	0,00	L					970,001
	Buildings				77,593			2,131,640			4,045,953
	Leasehold improvements			-,-,	,	1		,,			, ,
	· —			0-	3,963	1		617,525	<del></del>		356,438
	Equipment				52,815			017,525			662,815
	Other	equal Form 900 Dart \	Colu					<b>&gt;</b>			6,035,207
	an maa mies ta ambagii te (Columni (a) mast	cquai i oiiii 330, Fail /	i, coiui	· · · · ( D)		-0(0//	•	-			0,033,207

Part VII Investments—Other Securities. Complete if the	ne org	ganization ansv	vered "Yes" on	Form 990, Par	t IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	(b	) Book value		(c) Method of va	
(1) Financial derivatives					
(2) Closely-held equity interests		2 261 045			_
(A) Government Issued Securities		2,261,845		F	
(B) Corporate Bonds		1,875,343		F	
(C) Assets Related to Pooled Funds (D)		187,543		F	
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	4,324,731			
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on F	orm !	990. Part IV. lı	ne 11c. See Fo	rm 990. Part X	. line 13.
(a) Description of investment	-	(b) Book value	(	(c) Method of va	luation
(1)			Cost	or end-of-year r	narket value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answered	• d 'Yes'	on Form 990. Pa	ort IV. line 11d S	ee Form 990. Pa	rt X. line 15
(a) Description					(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )				•	_
Part X Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	answe	red 'Yes' on Fo	orm 990, Part IV	/, line 11e or :	L1f. 
1. (a) Description of liability (1) Federal income taxes		<b>(b)</b> B	ook value		
Gift Annuities Payable			643,512		
Liabilities Under Trust Agreement			1,409		
Pooled Income Deferred Revenue (4)			66,372		
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  2. Liability for uncertain tax positions In Part XIII, provide the text of	f the f	ootnote to the or	711,293 rganization's finar	ncial statements	that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 2)			-		

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . . . .

Page 4

9,613,187

374,977

9,544,047

9.544.047

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . .

**Supplemental Information** 

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b** . . . . . . . . . . . . . . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

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

Add lines 2a through 2d . . . .

Part XI

1

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

2e 798,280 e 3 3 8,814,907 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b Add lines **4a** and **4b** . . . . . . . 4c c

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . 5 8,814,907

5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 9,919,024 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2a 2b

2c

2d

4a

4b

Explanation

374,977

2e

3

4c

5

Page <b>5</b>		Schedule D (Form 990) 2017			
	ormation (continued)	Part XIII Supplemental Info			
	Explanation	Return Reference			

Schedule D (Form 990) 2017

### **Additional Data**

Software ID: **Software Version:** 

**EIN:** 04-6186012

Name: Unitarian Universalist Service Committee Inc.

**Supplemental Information** 

Explanation

Supplemental Information						
Return Reference	Explanation					
Part X, Line 2	UUSC accounts for the effect of any uncertain tax positions based on a "more likely than n ot" threshold to the recognition of the tax positions being sustained based on the technic al merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecogniz ed tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain tax positions. UUSC has identified its tax status as a tax exempt entity and its determination of which income is related and unrelated as its only significant tax positions and has determined that such tax positions do not result in uncertainty requiring recognition. UUSC is not currently under examination by a ny taxing jurisdiction. UUSC's Federal and state income tax returns are generally open for examination for three years after the date of filing, including extensions.					

upplemental Information	
Return Reference	Explanation
art XI, Line 2d - Other djustments	Rental expense 374,977 Change in value of split-interest gifts -87,569

Su

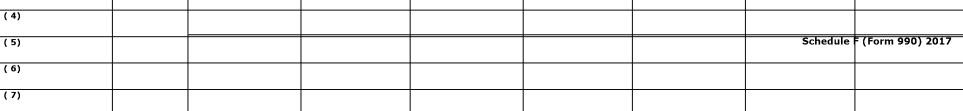
upplemental Information						
Return Reference	Explanation					
Part XII, Line 2d - Other Adjustments	Rental expense 374,977					

s

efile GRAPHIC print -	DO NOT PRO	CESS	As Filed Data			DLN:	93493318079738	
SCHEDULE F (Form 990)	Stateme	ent of A	Activities (	Outside the United States OMB No. 1545-0047				
(1 0 000)	► Complete if	the organi		res" to Form 990, Part IV, I to Form 990.	ıne 14b, 1	5, or 16.	2017	
Department of the Treasury Internal Revenue Service	► Information a	bout Scheo	dule F (Form 990)	and its instructions is at wi	vw.irs.gov	/form990.	Open to Public Inspection	
Name of the organization						Employer ident	tification number	
Unitarian Universalist Servic Committee Inc	e					04-6186012		
	ormation on A art IV, line 14b.		Outside the U	<b>Jnited States.</b> Comple	ete if the	organization ar	nswered "Yes" to	
other assistance, the to award the grants	e grantees' eligit or assistance? Describe in Part	ollity for th	ne grants or assis	substantiate the amount stance, and the selection dures for monitoring the	criteria i	used	✓ Yes □ No er assistance	
3 Activites per Region (	The following Pai	rt I, line 3 t	table can be duplı	cated if additional space is	s needed )	)		
(a) Region		Number of ices 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)	program spe	rity listed in (d) is a service, describe ecific type of ee(s) in region	(f) Total expenditures for and investments in region	
( 1) See Add'l Data								
(2)								
(3)								
(4)								
( 5)								
3a Sub-total b Total from continuation Part I		(	0 0				921,118 0	
c Totals (add lines 3a ar			o o for Form 990		No 5008:	2\W Schedule	921,118 e F (Form 990) 2017	

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1) See Add'l Data								
( 2)								
( 3)								
(4)								

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.



( 5)				Schedule	F (Form 990) 2017
( 6)					
(7)					
( 8)					
( 9)					
( 10)					
( 11)					

( 9)				
(7)				
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( 11)				
( 12)				
( 13)				
( 14)				
( 15)				

( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

(4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page **3** 

Schedule F (Form 990) 2017

Part IIII Grants and O	ther Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	90, Part IV, line 16.				
Part III can be	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) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
(1)											
( 2)											
(3)											

Sche	dule F (Form 990) 2017		Page <b>4</b>
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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, do not file with Form 990)	Yes	<b>☑</b> 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)	Yes	<b>✓</b> No
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)	□Yes	<b>☑</b> 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)	□Yes	<b>☑</b> No
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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	<b>✓</b> No
	Schedul	e F (Form 9	990) 2017

Schedule F (Form 990) 2017 Page 5 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). Return **Explanation** Reference Part I. Line Activities for each grant are outlined in the proposal form and are mutually agreed upon by UUSC and the partner organization. The goals of the project must be in line with UUSC's mission and vision and the partner organization must comply with Department of Treasury regulations. Once the grant is awarded, the progress of goals and activities is monitored using a results based monitoring and evaluation system that includes the following methods metrics systems, whole measure rating scale, complex adaptive

systems, systems thinking, observation and ethnographic story lines. These methods are implemented through a variety of ways such as site visits, regular phone calls, focus group meetings, written reports, and financial reports. A written midterm report is requested as well as a financial report. Upon completion of the project, a final written narrative and financial report is requested that

analyzes the success and challenges of the project based on the goals and activities outlined in the proposal

Return Reference	Explanation
Schedule F, Part II, Line 2	The number of grantees listed on Part II, Line 2 represents the number of recipient organizations, not the number of grants made

## **Additional Data**

Fast Asia and the Pacific

North America

## Software ID: Software Version:

**EIN:** 04-6186012

Name: Unitarian Universalist Service

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

(a) Region	(b) Number of	(c) Number of	(a) Activities co
	offices in the	employees or	ın region (by ty
	region	agents in	fundraising, p
		region	services, gra
i			

Committee Inc.

(e) If activity listed in (d) is a program service, describe specific type of service(s) in region

(f) Total expenditures for region

//-> No marks and 6 | /-> No marks and 6 | /-> A -to ortoon conducted

ype) (re, program

Located in the Region

Located in the Region

0 Grants to Recipients

ants to recipients located in the

332,258

78,650

region) 0 Grants to Recipients

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South America 0 Grants to Recipients 1.936 Located in the Region South Asia 0 Grants to Recipients 10.595 Located in the Region

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Sub-Saharan Africa 0 Grants to Recipients 100,000 Located in the Region Central America and the 0 Grants to Recipients 209.845 Carıbbean Located in the Region

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or ın region (by type) (ı e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) Europe (Including Iceland & 187.834 0 IGrants to Recipients Greenland) Located in the Region

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS codel (h) Description (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(If arant non-cash disbursement assistance appraisal, applicable) assistance other) Central Americal Humanitarian 124.845 Wire Transfer land the Assistance Carıbbean 25.000 Wire Transfer lCentral AmericalHumanitarian land the lAssistance

Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America Humanitarian 20,000 Wire Transfer land the Assistance Carıbbean Central America Humanitarian 15.000 Wire Transfer land the Assistance

Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America Humanitarian 15,000 Wire Transfer land the Assistance Carıbbean Central America Humanitarian 10.000 Wire Transfer land the Assistance

Carıbbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 36,938 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 35,000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Humanitarian 31,688 Wire Transfer Ithe Pacific Assistance East Asia and 31,000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 30,882 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 25,000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Humanitarian 25,000 Wire Transfer Ithe Pacific Assistance East Asia and 21,000 Wire Transfer Humanitarian Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 20,000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 20,000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 19,328 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 11.882 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 8,500 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 5.980 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV. cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and 5,060 Wire Transfer lHumanıtarıan Ithe Pacific Assistance East Asia and 5.000 Wire Transfer lHumanıtarıan Ithe Pacific Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (e) Amount of I (a) Name of (d) Purpose of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) North America | Humanitarian 25,000 Wire Transfer Assistance North America lHumanitarian 20,000 Wire Transfer Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (e) Amount of I (a) Name of (d) Purpose of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) North America | Humanitarian 18,650 WIRE Transfer Assistance North America lHumanitarian 15,000 Wire Transfer Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (a) Name of (e) Amount of I (d) Purpose of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South America Humanitarian 1.936 Wire Transfer Assistance South Asia 5.595 Wire Transfer Humanitarian Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia 5,000 Wire Transfer lHumanitarian lAssistance Sub-Saharan 35,000 Wire Transfer lHumanitarian lAfrica lAssistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 20,000 Wire Transfer lHumanitarian lAfrica lAssistance Sub-Saharan 20,000 Wire Transfer lHumanitarian lAfrica lAssistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 15,000 Wire Transfer lHumanitarian lAfrica lAssistance Sub-Saharan 10.000 Wire Transfer lHumanitarian lAfrica lAssistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 35,000 Wire Transfer Europe Humanitarian (Includina Assistance Iceland & Greenland) 28.000 Wire Transfer Europe Humanitarian (Includina Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 25,000 Wire Transfer Europe Humanitarian (Includina Assistance Iceland & Greenland) 24.834 Wire Transfer Europe Humanitarian (Includina Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 20,000 Wire Transfer Europe Humanitarian (Includina Assistance Iceland & Greenland) 20.000 Wire Transfer Europe Humanitarian (Includina Assistance

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 20,000 Wire Transfer Europe Humanitarian (Includina Assistance Iceland & Greenland) 15.000 Wire Transfer Europe Humanitarian (Includina Assistance

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**SCHEDULE G** 

(Form 990 or 990-EZ)

Department of the Treasury

As Filed Data -

DLN: 93493318079738

OMB No 1545-0047

## **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

Open to Public

Inter	mal Revenue Service	►Information about Schedule	e G (Form	990 or 990	)-EZ) and its instructions is a	t www irs gov/form990.	Inspection	
	ne of the organization					Employer id	entification number	
	nmittee Inc		04-6186012					
P	_	-	_			rm 990, Part IV, line	17.	
	Form 990-EZ fil	ers are not required to	comple	te this p	oart.			
1	Indicate whether the org	Indicate whether the organization raised funds through any of the following activities Check all that apply						
а	✓ Mail solicitations			е	✓ Solicitation of non-	government grants		
b	✓ Internet and email se	Fundraising Activities. Complete if the orgate Form 990-EZ filers are not required to complete whether the organization raised funds through an Mail solicitations  Internet and email solicitations  In-person solicitations  In-person solicitations  the organization have a written or oral agreement witter employees listed in Form 990, Part VII) or entity in Yes," list the ten highest paid individuals or entities (fuse compensated at least \$5,000 by the organization  and address of individual entity (fundraiser)  and address of individual entity (fundraiser)  Donor Marketing Connecticut Ave NW Ste  Interest munications Leesburg Pike Suite 301		f	Solicitation of gove	ernment grants		
c	✓ Phone solicitations			g	Special fundraising	events		
d	☑ In-person solicitation	ns						
<b>2</b> a	Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No						∕es □ No	
b				draisers)	pursuant to agreements			
(i)	Name and address of indiv or entity (fundraiser)	ridual (ii) Activity	fundrai custo cont	) Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization	
1	Integrated Direct Marketin 1250 Connecticut Ave NW 200 Washington, DC 20036	ng   -	Yes	<b>No</b> No	1,953,903	153,260	5 1,800,637	
2	Public Interest Communications 7700 Leesburg Pike Suite Falls Church, VA 22043			No	121,800	47,172	2 74,628	
3								
4								
5								
6								
7								
8								
9								
10								
Tot	al	ı	1	<b>•</b>	2,075,703	200,438	1,875,265	

MN, RI, HI, OK, FL, CO, WI, DC, AK, AR, AL, UT, WV, MA, PA, SC, CA, IN, NC, NH, NY, OH, OR, VA, WA, CT, ME, GA, IL, KS, KY, MD, MI, NJ, NM, TN, MS, LA, MO, ND, AZ

<sup>3</sup> List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

Sche	edule G (Form 990 or 990-EZ) 2017				Page 2		
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising e	event contributions and					
	gross receipts greater than \$!	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events		
		(event type)	(event type)	(total number)	(add col (a) through col (c))		
Revenue							
eve							
~	1 Gross receipts						
	2 Less Contributions						
	4 Cash prizes						
	5 Noncash prizes						
ses	6 Rent/facility costs						
Direct Expenses	7 Food and beverages						
ញិ អ	8 Entertainment						
elic	9 Other direct expenses						
_	10 Direct expense summary Add lines 4 t	through 9 in column (d)		· <b>.</b>			
	11 Net income summary Subtract line 10						
Pai	<b>Gaming.</b> Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part 1	IV, line 19, or reported	more than \$15,000		
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
	1 Gross revenue						
Expenses	2 Cash prizes						
ă	3 Noncash prizes						
ect	4 Rent/facility costs						
<u>ā</u>	5 Other direct expenses						
		☐ Yes%	☐ Yes %	☐ Yes %			
	6 Volunteer labor	☐ No	☐ No	☐ No			
	7 Direct expense summary Add lines 2 t						
	8 Net gaming income summary Subtrac						
9	Enter the state(s) in which the organization conducts gaming activities						
a b	Is the organization licensed to conduct go If "No," explain	☐ Yes ☐ No					
10a b	Were any of the organization's gaming lid	☐ Yes ☐ No					
					l		

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page <b>3</b>			
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No				
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entity $\mathfrak{g}^2$	У	□Yes	□No				
13	Indicate the percentage of gaming acti	vity conducted in							
а	The organization's facility		13	a		%			
b	An outside facility		13	b		%			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records								
	Name ►								
	Address •								
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?								
Ь	If "Yes," enter the amount of gaming reasonant of gaming revenue retained by								
c	If "Yes," enter name and address of the third party								
	Name •								
	Address ►								
16	Gaming manager information								
	Name ▶								
	Gaming manager compensation ► \$								
	Description of services provided ►								
	☐ Director/officer	☐ Employee ☐ Independent contractor							
17 Mandatory distributions									
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?								
b									
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).			
	Return Reference	Explanation							

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934933180	79738
Schedule I (Form 990)		Governments	Other Assistan	s in the Unite	d States		0	2017	47
Department of the Treasury Internal Revenue Service			ation answered "Yes,"  ▶ Attach to Forn le I (Form 990) and its	า 990.				Open to Public Inspection	
Name of the organization Unitarian Universalist Service Committee Inc							oyer identific 186012	ation number	
	rmation on Grants								
the selection criteria us	ed to award the grants	or assistance?	the grants or assistance,		for the grants or assistan	ce, and		✓ Yes	□ No
			and Domestic Governme ditional space is needed	ents. Complete If the o	rganization answered "Yes	" on Form 990,	Part IV, line	21, for any recip	ient
(a) Name and address of organization or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Descr noncash as		(h) Purpose of or assistance	f grant
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		-	s listed in the line 1 table				<b>▶</b>		35
For Paperwork Reduction Act N				Cat No 50055			Sch	edule I (Form 990	) 2017

Schedule I (Form 990) 2017				1.107		Page <b>2</b>
Part III Grants and Other Ass Part III can be duplicat				inization answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assista	ance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental I	Informatic	<b>n.</b> Provide the inf	iormation required in	Part I, line 2; Part III	, column (b); and any other a	،ddıtıonal ınformatıon.
Return Reference	Explanatio	ən				
			the end of the term, a full oing throughout the term		report is requested that document	nts how the funds were used Monitoring and

Schedule I (Form 990) 2017

## Additional Data

Alabama Center for Rural

Montgomery, AL 36124

1305 N Flores Street

San Antonio, TX 78212

Refugee and Immigrant Center

for Education & Legal Services

Enterprise PO Box 241504

## **EIN:** 04-6186012

20-1283385

74-2436920

**Software Version:** 

Software ID:

Name: Unitarian Universalist Service Committee Inc.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5,000

38,000

(a) Name and address of	(0) ===1	(C) Inc section	(a) Amount or cash	(C) Amount of non	(1) Method of Valdation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

501(c)(3)

501(c)(3)

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

Advocacy Design & Implementation of

Sustainable Septic

Support Emergency

disaster response to

Hurricane Harvey in TX

System Right to Water Sanitation Project

(a) Name and address of (b) FIN (c) IPC coction (d) Amount of cash (e) Amount of non- (f) Method of valuation

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 04-2103733 501(c)(3) 62.475 Hurricane IRMA Relief Unitarian Universalist Association Fund

Continuation of Justice

& Solidarity in Rural

Communities

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

24 Farnsworth Street Boston, MA 021101409 Rural Community Workers'

60731 Highway M

Milan, MO 63556

Alliance

61-1718871

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Allied Media Projects 01-0559608 501(c)(3) 13.000 Black Muslim Follow-up 4126 Third St Convening & Love

15,000

Resists Research Col

Maximizing Impact of Refugee Guidebook

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Detriot, MI 48201

PO Box 9172 Anaheim, CA 92812

Arab American Civic Council

45-3309117

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 46 0000470 E04/ \/3\ E0 000 zing Support\_UN

Detent

1532 Galena Street 380 Aurora, CO 80010	46-0932179	501(c)(3)	50,000		Fact-Finding Mission HR Abuse in Burma
Center for Transformative	16-0990318	501(c)(3)	25,000		Prisoner Project &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Ithaca, NY 14853

Accompainment for Action 119 Anabel Taylor Hall LGBTQI Immigrant

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 42-1734371 501(c)(3) 15,000 Minnesota Unitarian Train, Coach & organize

(Neighborhood) Project

Universalist Social Justice Alliance 900 Mt Curve Ave Minneapolis, MN 55403					at-risk Comm
Northwest Arkansas Workers' Justice Center	20-3709967	501(c)(3)	15,000		Expansion of the Commitee Barrios

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

210 S Thompson Street Suite

Springdale, AR 72764

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

449 Troutman Street Suite A

Brooklyn, NY 11237

Austin, TX 78768  Center for Popular Democracy	45-3813436	501(c)(3)	20,000		Support expansion of
PO Box 1621					Networks in Texas
Justice Ministry					strengthening Sanctuary
Texas Unitarian Universalist	46-3560205	501(c)(3)	15,000		Support creation &

make the Road PA's

comities de defensa

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

Community Initiatives for Visiting Immigrants in Confinement PO Box 40677 San Francisco, CA 94140	80-0875881	501(c)(3)	20,000				Continued support for expanded National immigration Dententi
---	------------	-----------	--------	--	--	--	--

Regional Protection System Central Amer

501(c)(3) 30,000 Foundation Cristosal INC 03-0366224 Building Capacity of

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

9641 Carousel Center Dr

Syracuse, NY 13204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ocacy & Capacity lding for Alaska

Recovery Response to

Hurricane Harvey

30,000

Alaska Institute for Justice	56-2533062	501(c)(3)	57,160		Advocacy & Capacity
431 West 7th Ave Suite 208			· ·		Building for Alaska
Anchorage, AK 99501					Native Communities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

45-3855515

Fe Y Justicia Worker Center

3809 Driscoll Street

Houston, TX 77098

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance panding Outreach for

Georgia Latino Alliance For Human Rights 7 Dunwoody Park Suite 110 Atlanta, GA 30338	76-0809155	501(c)(3)	15,000		Expanding Outrea ICE-Free Zones
Greater Minnesota Worker	46-3874287	501(c)(3)	20,000		Resist & Persist

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

122

Saint Cloud, MN 56301

sist & Persist Center Campaign Continuation 2719 W Division Street Suite FY18

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Strengtehning Defender

Network Core Team

Convening

Grassroots Leadership	58-1581743	501(c)(3)	23,000		I .	Winning Sanctuary &
2301 E Cesar Chavez						Prosecutorial Discretion
Austin, TX 78702						in Central Texas

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

72-1597864

Justice in Motion

789 Washington Ave

Brooklyn, NY 11238

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance

Climate

					1
West Street Recovery	82-2708194	501(c)(3)	30,000		Recov
1707 West Street					Hurric
Houston TV 77026					1

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Spokane, WA 99202

overy Response to

1707 West Street Houston, TX 77026			·		Hurricane Harvey
New Stories 924 East Ninth Avenue	91-2038316	501(c)(3)	25,000		Facilitate the First Peoples Convening on

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Wellness Initiative &

Kinship Pra

Lone Star Legal Aid 74-1537787 501(c)(3) 25,000 Provide disaster-related legal aid Hurricane Houston, TX 77001 Expending the Mental

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1001 Connecticut Ave NW Ste

Washington, DC 20036

201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Dismantling Chicago's

Harm

Gang Database & Repair

Unitarian Universalist Advocacy	04-2103733	501(c)(3)	7,000		Support Strong State &
Network of Illinois					Federal immigration
9 Pinewood Drive					Advocacy in IL
Carbondale, IL 62901					•

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

61-1403712

Latino Union

Chicago, IL 60625

4811 N Central Park Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Unitarian Universalist Tristice 46-4229880 501/61/31 12 000 Support UUA1A7's dvocacy

Congregations for Love

Resist & Immigrations

Arizona Network 10400 E Camino Quince Tucson, AZ 85748	40 4223000	301(0)(3)	12,000		1	Immigration Adv
Unitarian Universalist Justice	87-0694546	501(c)(3)	16,000			Support to UU

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Ministry of California

1731 Howe Ave 579

Sacramento, CA 95825

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance UU Ministry for Earth 02-0530982 501(c)(3) 24.933 C2R Promoting climate

Migrants

1034 SW 13th Ave liustice advocacy Portland, OR 97205 No More Deaths 86-6006433 501(c)(3) 15,000 Resisting State PO Box 40782

Interference Tucson, AZ 85717 w Humanitarian Aid to

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 61 1401210 E01/-1/21 15 000 ncy Response to

Space Innovations Labs

Living hope wheelchair	01-1491319	201(c)(2)	15,000		1	Emergency Response to
Association					1	Hurricane Harvey in the
9500 Westview Suite 104					1	Houston Area
Houston, TX 77055					1	
						1

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

12412 Groveview St D

Garden Grove, CA 92840

\rea 501(c)(3) Activate Labs 82-2271990 15.000 Justice & Peace-Makers

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-4368352 501(c)(3) 10.000 Coalition of Community Harvey Impact Needs

Emergency Response to

Nepal Follding

Organizations Assessment and 7113 Parker Road Response Project Houston, TX 77016

Empower Generation 45-2610872 501(c)(3) 5.000 7455 SW Montclaire Drive

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97225

(a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Provide ongoing Nation-

Unitarian Universalist Refugee 26-0212489 501(c)(3) 5,000 Provide ongoing Nati wide congress legal Educations 1600 Buena Vista Drive

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Vista, CA 92081

efil	e GRAPHIC pi	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	8079	738
Sch	edule J	C	ompensati	ion Information	ОМ	IB No	1545-0	0047
`	n 990)	► Complete if the or	Compensa ganization answ ► Attach	Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV n to Form 990. I (Form 990) and its instructions	, line 23.		)17	
•	tment of the Treasury al Revenue Service	P Information a		gov/form990.	is at		ectio	
Nar	ne of the organization			<del>.</del>	Employer identificat			
Con	nmittee Inc				04-6186012			
Pa	rt I Questi	ons Regarding Compensa	ation					
1a				f the following to or for a person liste by relevant information regarding the			Yes	No_
	☐ First-class	or charter travel		Housing allowance or residence for	personal use			
	☐ Travel for	companions		Payments for business use of perso	nal residence			
	Tax idemi	nification and gross-up paymen	ts 🔲	Health or social club dues or initiati	on fees			
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chaut	ffeur, chef)			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	<b>1</b> b		
2				or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/	Executive Directo	r, regarding the items checked in line	e 1a <sup>?</sup>			
3	organization's C	EO/Executive Director Check a	ill that apply Dor	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain				
	<b>☑</b> Compens	ation committee	$\checkmark$	Written employment contract				
	✓ Independ	ent compensation consultant	$\checkmark$	Compensation survey or study				
	☐ Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a	Yes	
b		r receive payment from, a supp		ified retirement plan?		4b		No
c	Participate in, o	r receive payment from, an equ	ııty-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	olicable amounts for each item in Par	t III			
		), 501(c)(4), and 501(c)(29		·				
5		ed on Form 990, Part VII, Section Ontingent on the revenues of		the organization pay or accrue any				
а	The organization	٦?				5a		No
b	Any related orga	anization?				5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section on tingent on the net earnings o		the organization pay or accrue any				
а	The organization	٦٦				6a		No
b	Any related orga					6b		No
	If "Yes," on line	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Ye		the organization provide any nonfixe irt III	d	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For I	Danerwork Pedi	iction Act Notice, see the In-	structions for Ec	orm 990 Cat No 5	50053T Schedule 1	/Form	990)	2017

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

For each individual whose					organization on row (i) ar	nd from related organizati	ons, described in the	
<b>Note.</b> The sum of column			: are not listed on Form 9 dividual must equal the to		Part VII, Section A, line	1a, applicable column (D)	and (E) amounts for tha	t ındıvıdual
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 Thomas H Andrews President & CEO (until 11-	(i)	273,005	0	47,208	8,250	25,983	354,446	0
17)	(ii)	0	0	0	0	0	0	0
2 Rachel Freed VP & CPO	(i)	153,174	10,000	0	13,831	0	177,005	0
	(ii)	0	0	0	0	0	0	0
3 Mack Davidson VP & CAO	(i)	151,236	10,000	0	13,831	6,658	181,725	0
	(ii)	0	0	0	0	0	0	0
4 Cassandra Ryan VP & CDO	(i)	144,828	10,000	0	15,368	25,983	196,179	0
	(ii)	0	0	0	0	0	0	0
<b>5</b> Kathleen McTigue Director of UUCSJ	(i)	133,131	2,796	0	13,430	25,983	175,340	0
	(ii)	0	0	0	0	0	0	0
6 Carol Cahalane Dir of Finance	(i)	121,314	2,440	0	12,028	0	135,782	0
511 Of Findings	(ii)	0	0	0	0	0	0	0
<b>7</b> William Schulz Former President/President	(i)	101,158	0	0	10,353	9,151	120,662	0
Emeritus	(ii)	0	0	0	0	0	0	0
							Schedule	1 (Form 990) 2017

chedule J (Form 990) 2017						
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					
Return Reference	Explanation					
	Thomas Andrews received a severance payment in the amount of \$187,125 during the fiscal year. A portion of this amount was paid in calendar 2017 and is reported in Schedule J, Part II, column (B)(iii). The balance of the payment was made during calendar 2018.					
Part I, Line 7	Bonuses were paid to all qualified staff members based upon their annual performance review					

Schedule J (Form 990) 2017

ef	ile GRAPHIC print - DO NO	T PROCESS As	Filed Data -								DLN: 9	34933:	1807	9738
	hedule K orm 990)	Su	pplemental l	Information o	n Tax-E	xempt	Bonds					No 1545		
	,	► Complete if the		wered "Yes" to Form , and any additional i				scriptions,				201	/	
	artment of the Treasury		•	► Attach to Form 99	D.							en to Pu		
	rnal Revenue Service en le control le contro	▶Informatio	n about Schedule i	( (Form 990) and its	instruction	s is at <u>ww</u>	w.irs.gov/to	<u>rm990</u> .	Emplo	ver iden		nspecilo 1 number	n	
Unit	tarıan Universalist Service								'	86012				
	nmittee Inc art I Bond Issues								10101					
_	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Descrip	tion of purpose	e (g) De	feased	(h)	On	(i)	Pool
							.,		1.57		beha issi	lf of	finar	
									Yes	No	Yes		Yes	No
A	Mass Development Finance	04-3431814	000000000	05-17-2007	3,5	00,000 Pu	rchase of Offi	e Building	1.55	X		X		X
	Agency													
Pa	rt III Proceeds													
					1	4		В	С	!			D	
1	Amount of bonds retired													
2	Amount of bonds legally defea													
3	Total proceeds of issue					3,500,00	00							
4	Gross proceeds in reserve fund													
5	Capitalized interest from proce													
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds					47,00	00							
8	Credit enhancement from proc													
9	Working capital expenditures f													
10	Capital expenditures from prod					3,453,00	00							
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completion	<u> </u>		• •		09 N	V	N-	V	N.			1	NI
_	Were the bonds issued as part	of a current refunding	7 ICCHO2		Yes	No X	Yes	No	Yes	No		Yes	'	No
14	Were the bonds issued as part												+	
15						Х							-	
16	Has the final allocation of proc				Х									
17	Does the organization maintain proceeds?	n adequate books and	records to support the	ne final allocation of	Х									
Pa	rt IIII Private Business U			-									1	
					ı	4		В	C				D	
					Yes	No	Yes	No	Yes	No		Yes		No
1	Was the organization a partner financed by tax-exempt bonds					×								
2	Are there any lease arrangements	ents that may result in	private business use		Х									
For	Panerwork Reduction Act Not				Ca	No 5019	3F			<u> </u>	chedule	K (Form	n 990	1) 2017

5

9

Part IV

Arbitrage

Enter the percentage of financed property used in a private business use as a result of

organization, or a state or local government . . . . . . . . . . . .

Penalty in Lieu of Arbitrage Rebate? . . . . If "No" to line 1, did the following apply? . . . .

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . . . Is the bond issue a variable rate issue? . . . . .

Was the hedge superintegrated? . . . . . . Was the hedge terminated? . . . . . . . . .

No rebate due? . . . . . . . . .

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

unrelated trade or business activity carried on by your organization, another section 501(c)(3)

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Page 2

0 %

0 %

C

No

Yes

Schedule K (Form 990) 2017

No

Yes

Х

Χ

Yes

No

Χ

No

Χ

Χ

Χ

Χ

Х

Α

Yes

Χ

requirements of section 148? . . .

Were gross proceeds invested in a guaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Schedule K (Form 990) 2017

(GIC)?

period?

Part V

Page 3

No

No

Yes No Yes No Yes No Yes

Yes

No

Yes

No

Yes

Schedule K (Form 990) 2017

X

Yes

Χ

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

Nο

efile GRAPHI	C print - DO NO	OT PROCESS	S As Fi	led Data -					DI	_N: 93	4933	1807	79738
Schedule L (Form 990 or 990	Comple	te if the orga 27, 28a,	nization a 28b, or 28 ▶ Attac	OS With In nswered "Yes Sc, or Form 99 th to Form 99	s" on Form 9 0-EZ, Part V 0 or Form 99	90, Part IV, I , line 38a or • 0-EZ.	ines 2! 40b.	·			<sup>4B No</sup>		
Department of the Trea	asurv	ormation abo	out Schedu	ıle L (Form 99 <u>www.irs.gov</u>		) and its inst	ructior	ıs is	at	(	)pen		ıblic
Name of the org Unitarian Universal Committee Inc	anızatıon							•	<b>yer id</b> 6012	entifica			
	ss Benefit Trailete if the organiza						rganıza	tions	only)	ne 40b			
	) Name of disqual			Relationship be				(c) [	escrip ansact	tion of		) Corr es	ected? <b>No</b>
4958 3 Enter the all Correp  (a) Name of	mount of tax incur mount of tax, if an ans to and/or nplete if the organ orted an amount of (b) Relationship with organization	From Interestation answer	bove, reimbersted Per red "Yes" or Part X, line !	coursed by the or rsons. In Form 990-EZ, 5, 6, or 22	rganization .			t IV,	line 26	<b>h)</b> ved by rd or	(	janiza i)Writ jreem	ten
			То	From			Yes	No	Yes	No No	Yes		No
Total				•	<u> </u> ▶ \$								
	nts or Assistan					line 27.							
	rested person (b		between n and the	(c) Amount		( <b>d)</b> Type	of assis	stanc	e	<b>(e)</b> Pu	rpose o	of assi	stance
									+				
									_				
or Danerwork Dec	luction Act Notice	sae the Instruc	tions for Eo	rm 000 or 000-l	<b>7</b> C:	at No. 500564		C - I		l (Eorm	000 -	. 000	F7\ 201

Complete if the organization	answered "Yes" on Forn	n 990, Part IV, line 28a	a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	(e) Shorganiz	f :ation's
				Yes	No
(1) Family member of Board Member	Family member of Board Member	51,385	Employment		No

Return Reference

**Supplemental Information** 

Part V

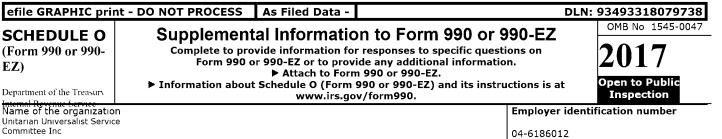
Provide additional information for responses to questions on Schedule L (see instructions)

Explanation

Schedule I (Form 990 or 990-F7) 2017

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN: 9	9349331	8079	738
	IEDULE M			loncash Contri	hutione		OMB No 1	.545-0	047
(For	m 990)		1	ioncasii contin	Dutions		20	1 -	7
		▶Complete if the	organizati	ons answered "Yes" on Fo	orm 990, Part IV, lines 2	9 or 30.	<b>20</b>	1/	<b>'</b>
		► Attach to Form							
•	tment of the Treasury al Revenue Service	▶Information abo	out Schedu	lle M (Form 990) and its in	nstructions is at <u>www.ir</u>	s.gov/form990	Open to Inspe		
	e of the organizat					Employer identi	fication n	umbe	r
	rian Universalist Serv nittee Inc	vice				04-6186012			
Pa	rt I Types	of Property							
			(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method noncash cor	(d) of determination a		ts
1	Art—Works of art	t			19				
2	Art—Historical tr								
3	Art—Fractional in	nterests							
4	Books and public	ations							
5	Clothing and hou								
6	goods Cars and other v								
7	Boats and planes								
-	Intellectual prope								
9	Securities—Public		X	50	315,97	3 market value			
10	Securities—Close				·				
11	Securities—Partr								
	or trust interest								
13	Securities—Misce Qualified conserv								
13	contribution—Hi structures	istoric							
14	Qualified conserv								
15	contribution—Of Real estate—Res								
16	Real estate—Res								
17	Real estate—Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic	al supplies .							
21	Taxidermy .								
	Historical artifact								
	Scientific specim								
24	Archeological art								
	Other ▶ (	· ·							
26 27	Other ► (								
	Other • (								
	<u>`</u>		he organiza	ation during the tax year for	contributions				
	for which the org	janization completed	l Form 8283	3, Part IV, Donee Acknowled	gement	29			0
								Yes	No
30a	must hold for at	least three years fr	om the date	y contribution any property reports of the initial contribution, a	and which is not required to	be used for exem	·		N-
b	If "Yes," describ	e the arrangement i	n Part II				30a		No
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the reviev	v of any nonstandard contr	ibutions?	31	Yes	
32a		zation hire or use th		or related organizations to so	olicit, process, or sell nonce	ash · · · ·	32a		No
b	If "Yes," describ	e in Part II							
33	-	•	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								<u> </u>
FOR D	anorwark Doductie	on Act Notice, see the	Instruction	is for Form QQA	Cat No. 512271	Schadu	ile M (Form	· uanı	こついエフト

Page 2 Schedule M (Form 990) (2017) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation The number shown in column B represents the total number of gifts of securities and other gifts Part I, Column (b) Schedule M (Form 990) (2017)



990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 1	Guided by UU principles and the Universal Declaration of Human Rights, UUSC strives to adv ance human rights, dismantle systems of oppression, and uplift and affirm the inherent wor th and dignity of all people. We center the voices and experiences of those most affected and strengthen those grassroots groups and movements who are organizing themselves to adva nce these goals. In order to accomplish this, we offer justice education and leadership de velopment, engagement and mobilization for advocacy, partner support, and grant funding. U USC aims to leverage our particular strategic assets and strengths to disrupt criminalizat ion and systemic oppression of people based on their identities, support self-determination and defend the rights of people who are or may be forced to leave the places they call home due to climate, conflict, or economic hardship, and address the root causes of forced displacement, and respond to humanitarian crises as partners with people whose access to a id is most limited, by helping them to rebuild their lives and by addressing the human rights issues or violations that make them more vulnerable. We have used much of the last year to narrow the scope of our work, focusing on migrant justice in Central America, climate -forced displacement in Alaska and the Pacific, and humanitarian crisis response in Burma, Eastern Europe, and Texas. In all of our work, UUSC and our partners work with the most vulnerable communities, including. In Burma, all of our partners are focused on protecting the rights of the Rohingya Muslim minority, currently facing a crisis of displacement and a military campaign of ethnic cleansing. In Mexico and Central America, UUSC's partners work with people who have been displaced from their home countries by state-sanctioned viole nce, are at risk of being displaced, or who have been repatriated and are in continued dan ger In the U.S., our partners work with criminalized populations, including undocumented people, those at risk of deportation, and humanitarian an

990 Schedule O, Supplemental Information

Doturn

Reference	ехрынацон
Form 990, Part I, Line 1	untries around the world UUSC excelled at fostering connections and collaborations, often provided the kind of support most likely to make an impact to grassroots organizations and their movements, and demonstrated flexibility in its approach to grantmaking For exampl e, more than 20 of our grantee partners were able to connect or collaborate through the work UUSC supported this year often as a result of an introduction from UUSC. We have also a nswered the call of grassroots organizations to join them as partners on the front lines and to support them in more creative ways. As one of our partners said of UUSC, "It is rare to find a funder who also works alongside us in this struggle for justice. Thank you so much for being our champion, our funder, and our partner." Together with our 80 program par tners around the world, we hope to reach more than 450,000 individuals in the coming year.

Evolunation

## 990 Schedule O, Supplemental Information

Return

Reference	
Part I, Management	(FY18 s FY17) UUSC follows generally accepted accounting principles for revenue recognition and experienced an anomalous surge with \$2 5m in pledges in FY15 at the peak of our highly successful UUSC Rising Campaign followed by \$0 5m in pledges in FY16, \$0 1m in FY17 and \$0 in FY18 As a result of our successful UUSC Rising Campaign to fund new strategic initiatives, program expenses increased over \$0 9m in FY16, 0 6m in FY17 and leveled within -\$0 1m in FY18 This activity explains the year to year differences seen in Part I on page 1 of the Form 990 Further information regarding UUSC Rising and our financial results is available by contacting UUSC at info@uusc org

Explanation

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Return Reference	Explanation
Form 990, Part III, Line 4a	Migrant Justice In FY18, UUSC supported thirty partners connected to our migrant justice s trategy. A key element of UUSC's grantmaking and partner support strategy in Central America has been the fostering of connections and opportunities for collaboration among our par thers there, which has had a particular impact on partners in El Salvador, Guatemala, and Mexico UUSC's work with partners in Honduras, Nicaragua, and the U.S. also reflects our a im to bring other elements of partner support and a broader range of our strategic assets to bear on the problem. For example, a number of UUSC staff members have traveled to Hondu ras as part of two accompaniment delegations, and the College of Social Justice (CSJ) has immersion learning programs up-and-running in Nicaragua and in development in El Salvador and Honduras. We have focused our advocacy efforts on resisting government policies that violate the rights of those arriving in the U.S. from Central America and Mexico, and policies, such as the provision of military aid, that exacerbate the very factors that drive the migration crisis. In the U.S., Freedom for Immigrants, RAICES, Grassroots Leadership, and the Queer Detainee Empowerment Project all collaborated to successfully advocate for the release of a victim of alleged sexual assault while in immigration detention. Grassroots Leadership has worked closely with the Texas UU Justice Ministry to spread the Austin sanc tuary model, combat Texas' anti-immigrant SB4 law, and advocate for the closure of private ly-run immigration detention facilities in the state. In Mexico, Scalabrinianas Misin con Migrantes y Refugiados accompanied nearly 200 migrants in legal and administrative process es, helping 96 individuals gain humanitarian visas. In Guatemala, Asociacin Pop No¹ succe safully accompanied 50 migrant children and adolescents who have returned to Guatemala from the United States and Mexico, some of whom were separated from their parents as a result of the U.S. government's "Zero Tolerance" policy. Asylum Ac

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Return Reference	Explanation
Form 990, Part III, Line 4a	on lawsuit challenging the arbitrary long-term detention of asylum seekers without bond he arings. On July 2, 2018, a federal district court judge ruled in the ACLU's favor, blockin g further detentions and ordering a review of each class members' particular case. As a re-sult of Georgia Latino Alliance for Human Rights' (GLAHR) "ICE-Free Zone" campaign, immigr ant communities in Georgia have created a culture of resistance," with local networks mobi lized against ICE's presence in their neighborhoods GLAHR has received reports of communities leveraging the awareness of their rights to avoid being picked up and detained by ICE officers searching inside trailer parks or apartment complexes. Grassroots Leadership and the Texas UU Justice Ministry were instrumental in the Austin City Council's adoption of a Freedom City Policy, which aims to end over-policing and criminalization of communities of color in Austin. In May 2018, after developing the partnership with Radio Progreso in H onduras, a number of speakers from Radio Progreso came to the US, visiting nine US cities. One speaker, Ely Castro Rosales, joined UUSC in Cambridge, where he presented to UUSC staff and outside visitors to call attention to the chronic violation of rights in Honduras UUSC and CSJ staff helped organize and publicize the speaking tour. A number of UUSC staff then departed for D C to join the Radio Progreso team on their Day of Prayer for Hondura s in D C, where they and other delegates from Boston met with staff at Senator Markey's of flice to raise human rights concerns related to U.S. policy in Honduras. Freedom for Immigrants, which has created the country's most significant national immigration detention vis itation network, answered almost 20,000 calls through its pro bono hotline, which UUSC's funding helped establish in 2016. These hotline calls helped FFI connect 5,995 immigrants in detention to their families and other resources. Humanitarian Crisis Response Syrian Ref ugee Response In response to the Syrian refugee crisis, UUS

Return Reference	Explanation
Form 990, Part III, Line 4a	ction of human rights of refugees and migrants since the crisis began. Our partner in Hung ary, the Cordelia Foundation, praised UUSC's "flexibility, swift communication, and the re latively low amount of administration in relation to the grant," which "helped the work of Cordelia a lot, especially during these turbulent times when [Cordelia has been] under im mense political and financial pressures" In Serbia and Croatia, Asylum Protection Center, Are You Syrious?, and the Center for Peace Studies have joined forces in the fight to bring justice to the family of a young girl killed as a result of an illegal pushback in Croa tia. In an increasingly repressive environment in Hungary, the Hungarian Helsinki Committee (HHC) has successfully challenged the immigration authority's frequent practice of unduly questioning the validity of documents submitted to prove the existence of a family tie, and on this ground automatically rejecting family reunification claims. Last year, using c amper vehicles purchased with a UUSC grant in 2015, Asylum Protection Center's (APC) mobil e teams reached 15,293 migrants and potential asylum seekers in Serbia and informed them of their current legal position and their rights. A further 7,644 asylum-seekers and refuge es obtained legal protection with APC's support. Burma The 2017 military campaign against the Rohingya in Northern Rakhine state was unprecedented in its birutality, forcing nearly 700,000 people to flee to Bangladesh in a matter of weeks. The United Nations has said that it the crimes committed "bear[] the hallmarks of genocide" UUSC supports grassroots organizations in Burma that are either led by members of directly impacted communities or support ting their self-empowerment. Our partners document and publicize human rights abuses, camp aign for accountability and inclusive speech, run leadership and conflict resolution train ings, and build coalitions across ethnic lines. In addition, UUSC's policy advocacy has yi elded real results in support of the priorites ident

Return Reference	Explanation
Form 990, Part III, Line 4b	UUSC's climate justice work currently focuses on advancing and protecting the rights of populations at risk of climate-forced displacement (CFD) caused by slow-onset climate impacts in Alaska and the Pacific UUSC's program emboldens the principle of the right to self-determination by prioritizing building protections in place and, when necessary and required by our partners, supporting communities to relocate with dignity Importantly, this work is still in its early stages, with much of this year's focus on preparing for an October 2018 convening in Alaska of all of our CFD partners. In Alaska, the Alaska Institute for Justice is building a relationship between the NOAA's National Weather Service and 15 Alaska Native communities threatened with climate-forced displacement, so that the knowledge of the Native communities is incorporated into data about winter storms and their impacts on community infrastructure and well-being. In Louisiana, UUSC's Innovation Fellow, the Lowlander Center, trained twelve new leaders from five Tribes to be advocates on the impacts of climate change. The courage of these young leaders has "reinvigorated" the older generation. Lowlander's Director told us, "There is so much hope and joy expressed in their pursuit to do what is right knowing. If the immediate and long-term impacts of climate change are already shaping their futures." In Papua New Guinea, Tulele Peisa's (TPI) "Schools Climate Change Road Show" resulted in the selection of 30 "Student Climate Change Warriors," whom TPI will train in climate change awareness. In its Student Climate Change Warriors, TPI sees a group of young leaders poised to make a difference in how their government confronts the impacts of climate change. In Kiribati, Live & Learn Environmental Education (LLEE) delivered what the organization believes to be "the first community outreach [in Kiribati, Ihat was integrated People are still talking about this because they found it fun." LLEE coupled human rights awareness raising with trainings related to c

Return Reference	Explanation
Form 990, Part III, Line 4c	The mission of the UUCSJ is to inspire and sustain faith-based activism for justice, on issues of local, national and global importance. We accomplish this through a variety of experiential learning programs. In fiscal year 2018 our programs included immersion learning journeys to Houston for a new Just Recovery program, the Arizona/Mexico border with BorderLinks and No More Deaths, three different Nicaragua programs with Guardians of the Yaoska, Equal Exchange, and the Fundacion Entre Mujeres (FEM), West Virginia with the Southern Appalachian Labor School (SALS). Six of these immersion programs were offered for youth groups. To support the Border and West Virginia youth programs, we created a full Youth Study Guide with justice resources for use before and after the experiential learning. We expanded our programming for high school youth through Activate Your Community, a way to bring one- to three-day justice programming into UUA regions and districts. These were offered in Pennsylvania with the Central East Region and in Boston for the White Bear congregation's youth group. We continued our collaboration with the UUA's Pacific Western Region to offer the Goldmine Leadership Training twice, and with the UU-UNO Spring Seminar. In a new type of immersive learning, we provided a half-day justice program for 50 adults as part of the Pacific Western Region's gathering in Portland, OR. In a new initiative as part of Love Resists, UUCSJ helped recruit, coordinate, and deploy 60 volunteers mostly religious leaders in an action of humanitarian aid in the Arizona desert, in support of No More Deaths volunteers whose own humanitarian aid efforts are being criminalized. We continued our skilled volunteer placements with UUSC partner organizations, primarily working with refugees. Our internships for college age young adults placed. Interns with justice organizations in the US and India, through the generosity of our donors we were able to support our interns with small stipends. We deepened their experience through a ser

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Reference	
Form 990, Part VI, Section B, line 11b	The draft of the Form 990 is discussed and reviewed with the finance committee of the board of trustees for their comments, input and approval. All the members of the governing body receive either a hard copy or an electronic copy of the Form 990 before it is filed.

Explanation

Return Explanation

voting or making any decisions related to the matter

Reference

Form 990,
Part VI,
Section B,
Inne 12c

UUSC regularly and consistently monitors and enforces compliance with the conflict of interest policy which covers all staff and the board of trustees. In doing so, all decisions (financial) are scrutinized to ensure that they are not self-serving with respect to UUSC personnel or members of the board of trustees. Human Resources decides if a conflict of interest exists for UUSC personnel and elevates the matter to the President/CEO or the President of the board of trustees as appropriate. The board

completes a conflict of interest form annually which is then shared with the full board. Any conflicted individual is prohibited from

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compensation is similarly determined by reference to comparability data

Return

Deference

Reference	
Form 990,	The compensation of the President/CEO is determined by the executive committee of the board of trustees, all of whom are
Part VI,	independent of the President/CEO. The compensation is determined by reference to comparability data. The President/CEO's
Section B,	compensation is reviewed and potentially adjusted annually upon board approval. The organization maintains contemporaneous
line 15	documentation of the deliberation and decision. Compensation for other officers is determined by the President/CEO. Such

Explanation

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Reference

	UUSC makes its governing documents, conflict of interest policy and financial statements available to the public by publishing them on its website. Additionally, the Form 990 and financial statements are available through the Massachusetts Attorney.
Section C,	General's website
line 19	

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part XI, line

Change in Value of Split-interest Gifts -87,569

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -										DLN: 93493	318079	738
SCHEDULE R (Form 990)  Department of the Treasury Internal Personal Services  ■ Information about Services				swered "Yes		OMB No 1545-0047  2017  Open to Public Inspection								
Internal Revenue Service  Name of the organization  Unitarian Universalist Service  Committee Inc								loyer identif	ication		ection			
Part I Identification	of Disregarded En	<b>itities</b> Complete if t	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	(a)  Name, address, and EIN (if applicable) of disregarded entity			(b) Primary act		(c) Legal domicile (state or foreign country)		(d) Total income		( <b>e)</b> me End-of-year assets		<b>(f</b> Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Exe npt organizations dui		Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	V, line 34 be	cause	it had one or	more	
Name, address, and	<b>(a)</b> d EIN of related organizatio	n	Prim	<b>(b)</b> ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dii	<b>(f)</b> rect controlling entity	Section (13) cor enti <b>Yes</b>	512(b) ntrolled
For Paperwork Reduction Ac	t Notice, see the Inst	tructions for Form 99	00.		Ca	t No 5013	35Y				Sch	edule R (Form	990) 20	117

(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related unrelated, excluded from tax under sections 512- 514)	l, total incom		Disprop alloca	tions?	Code V- amount I 20 o Schedule (Form 1	-UBI on box f f e K-1 065)	(j) Gener mana partn	al or P ging c er?	<b>(k)</b> Percenta ownersh
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IV Identification of Related Or because it had one or more re (a) Name, address, and EIN of related organization		a corporation	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp, or trust)	wered "Yes  (f) Share of total income	Share	(g) e of end year assets	-of- I	(h) Percent owners	) tage	Sec (13)	) conti
because it had one or more re  (a)  Name, address, and EIN of	elated organizations treated as (b)	a corporation	on or tru: (c) Legal omicile	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end year	-of- I	(h) Percent	) tage	Sec (13)	entity es
because it had one or more re  (a)  Name, address, and EIN of related organization	Plated organizations treated as (b) Primary activity	a corporation	on or tru: (c) Legal Dimicile or foreign Duntry)	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end year	-of- I	(h) Percent	) tage	Sec (13)	-
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because it had one or more re  (a)  Name, address, and EIN of related organization  aritable Annuity Trusts (4)	Plated organizations treated as  (b)  Primary activity  Charitable Annuity Trust	a corporation	on or tru:  (c)  Legal  comicile  or foreign  buntry)  MA	Direct	ne tax year.  (d) t controlling entity  (C c	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) e of end year	-of- I	(h) Percent	) tage	Sec (13)	entity es

Pā	<b>Transactions With Related Organizations</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	<b>1</b> b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
	Sharing of paid employees with related organization(s)	10		No
p	Reimbursement paid to related organization(s) for expenses	1p		No
q	Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
	Other transfer of cash or property to related organization(s)	11		No

m	n Performance of services or membership or fundraising solicitations by related organization(s)		140							
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
0	Sharing of paid employees with related organization(s)	10	No							
р	Reimbursement paid to related organization(s) for expenses	1р	No							
q	Reimbursement paid by related organization(s) for expenses	1q	No							
r	Other transfer of cash or property to related organization(s)	1r	No							
s	Other transfer of cash or property from related organization(s)	1s	No							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds									
	(a) (b) (c) (d)		-1							
	Name of related organization  Transaction Amount involved Method of determining a type (a-s)	amount inv	oivea							

Schedule R (Form 990) 2017

Page **3** 

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

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017